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THE MONTANA STATE PLAN

For

ALCOHOL ABUSE AND ALCOHOLISM

PREVENTION, TREATMENT, AND REHABILITATION

Legislative Authority: P. L. 91-616

Catalog of Federal Domestic Assistance No. 13-257

Submitted By

THE MONTANA DEPARTMENT OF HEALTH
AND ENVIRONMENTAL SCIENCES

Fiscal Year 1973

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INTRODUCTION

This FY73 State Plan for Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation is a comprehensive addendum to the original Plan developed for FY72. The 1973 Plan is similar in overall scope but has been updated and whenever possible, the statistical data has been brought to a current status.

Reference is made to the 1972 Montana State Plan which is on file in the Department of Health and Environmental Sciences, Alcohol and Drug Dependence Bureau, 1424 Ninth Avenue, Helena, Montana.

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NAME AND ADDRESS OF THE AGENCY:

Montana Department of Health and Environmental Sciences
Cogswell Building
Helena, Montana 59601

THE NAME AND TITLE OF THE AGENCY DIRECTOR:

John S. Anderson, M.D., M.P.H., Director
(406) 449-2544

ORGANIZATIONAL STRUCTURE OF THE DEPARTMENT. The structure is shown in the attached organizational charts. The Departmental unit assigned major responsibilities for development and administration of the State plan is the Alcohol and Dependent Drugs Bureau of the Health Services Division, Robert L. Solomon, Bureau Chief. All other units and activities of the Department are available and will be utilized as necessary in the development and administration of the State plan.

EVIDENCE OF AUTHORITY. Title 69, chapter 62, R.C.M. 1947, established the Montana commission on alcohol and drug dependence to establish means whereby the apropriate resources of this State may be focused fully and effectively upon the problems of alcohol and drug dependence and utilized in implementing programs for the control and treatment of these problems.

Senate Bill No. 274, enacted in 1971 and commonly known as the Montana Executive Reorganization Act, in 82A-602 (3) (a) states "the Montana commission on alcohol and drug dependence, created in title 69, chapter 62, R.C.M. 1947, is abolished, and its functions

are transferred to the department. Unless inconsistent with this act, any reference in the Revised Codes of Montana 1947 to the Montana commission on alcohol and drug dependence means the department of health and environmental sciences." The department of health and environmental sciences was created by 82A-601 of Senate Bill 274 and was activated by the Governor under executive order dated November 27, 1971. Pertinent sections of title 69, chapter 62, R.C.M. 1947 are:

69-6203. Duties of commission - department authorized to accept gifts - enter into contracts - acquire and dispose of property. (1) The Commission shall:

(a) plan, promote, and assist in the support of alcohol and drug dependence prevention, treatment, and control programs;

(b) conduct, sponsor, and support research, investigations, and studies, including evaluation of all phases of alcohol and drug dependence;

(c) assist in the development of educational and training programs relative to alcohol and drug dependence, and carry on programs to assist the public, and technical and professional groups, in becoming fully informed about alcohol and drug dependence;

(d) promote, develop, and assist financially and otherwise, alcohol and drug dependence programs administered by other state agencies, local government agencies, and private non-profit organizations and agencies;

(e) encourage and promote effective use of facilities, resources,

and funds in the planning and conduct of programs and activities for prevention, treatment, and control of alcohol and drug dependence and, in this respect, co-operate with and utilize to the maximum possible extent the resources and services of federal, state, and local agencies.

(2) to carry out the purposes of this act, the Department may:

(a) accept gifts, grants, and donations of moneys and property from public and private sources;

(b) enter into contracts;

(c) acquire and dispose of property necessary.

69-6204. Receipt of financial assistance authorized - cooperation with other agencies and organizations - grants to other agencies and organizations. The Department may apply for and receive grants, allotments, or allocations of funds or other assistance for purposes pertaining to the problems of alcohol and drug dependence, or related social problems, under laws and rules of the United States, any other state, or any private organization. The Department may cooperate with any other government agency or private organization in programs on alcohol and drug dependence related social problems. In carrying out cooperative programs, the Department may make grants of financial assistance to government agencies and private organizations under terms and conditions agreed upon.

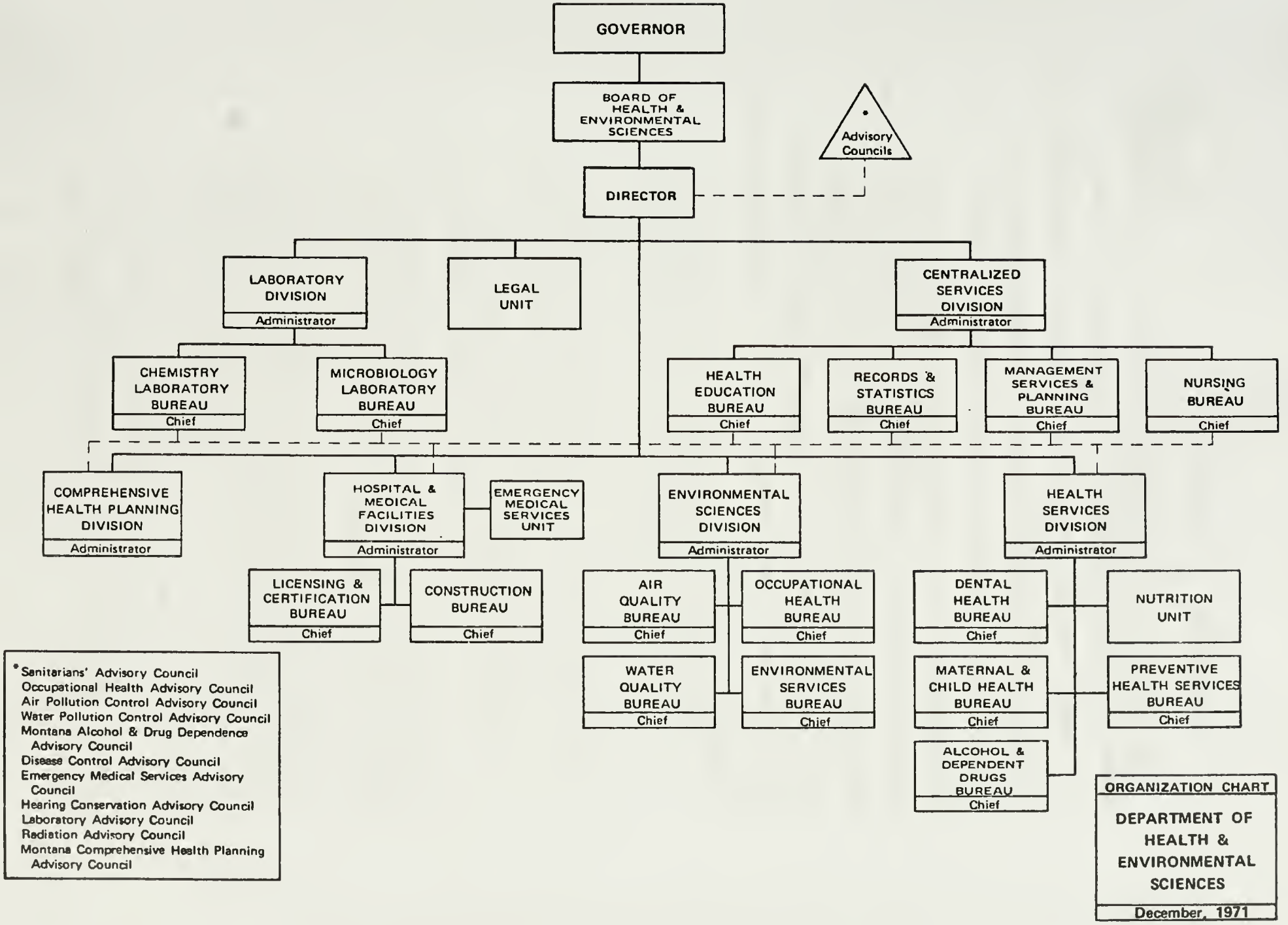
69-6205. Department to administer act. The Department shall administer the provisions of this act.

69-6206. State and local government to cooperate with Department - not subject to its control. All agencies of state government, local government, and all state and local government employees shall, upon request, cooperate with the Department in its activities under this act, but nothing in the act shall be construed to give the Department control over any state or local agency or employee, unless otherwise provided by law.

69-6207. Deposit of funds from federal or private sources with State Treasurer. Funds available to the Department from federal or private sources for use in alcohol and drug dependence prevention, treatment, and control programs, shall be deposited with the State Treasurer to the account of the Department in the federal and private revenue fund.

A Special Office dealing with Addictive Programs has been established in the Office of the Governor.

The Alcohol Abuse and Alcoholism Program activities of the Department of Health and Environmental Sciences will be closely integrated with this Office of Addictive Programs. This will facilitate a fully coordinated effort with the maximum potential for effectiveness in program planning and implementation.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Chief
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Occupational Health Advisory Council
Air Pollution Control Advisory Council
Water Pollution Control Advisory Council
Montana Alcohol & Drug Dependence Advisory Council
Disease Control Advisory Council
Emergency Medical Services Advisory Council
Hearing Conservation Advisory Council
Laboratory Advisory Council
Radiation Advisory Council
Montana Comprehensive Health Planning Advisory Council
ORGANIZATION CHART
DEPARTMENT OF HEALTH & ENVIRONMENTAL SCIENCES
December, 1971

ADMINISTRATION AND SINGLE STATE AGENCY. Former Governor Forrest H. Anderson designated the Montana Department of Health and Environmental Sciences as the single State agency to develop and administer the Comprehensive State Plan for Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation on December 17, 1971. This designation was in a letter expressing the desire of the State of Montana to participate in the formula grant program authorized under Public Law 91-616 and designating the Department as the single State agency (letter appended). An opinion of the Attorney General of the State of Montana has been requested regarding the powers of this agency. That opinion is as follows:

JOHN S ANDERSON M D
~~XXXXXXXXXXX~~
Director

State of Montana

State Department of Health

and Environmental Sciences
HELENA, MONTANA 59601

May 1, 1972

Morris E. Chafetz, M.D., Director
National Institute on Alcohol Abuse
and Alcoholism
National Institute of Mental Health
Department of Health, Education
and Welfare
Rockville, Maryland 20852

Dear Sir:

This office has been requested to offer letter of "evidence of authority", as provided by Section 3a, Section III entitled Administration of the Federal Guidelines furnished under Public Law 91-616, the Comprehensive Alcohol Abuse and Alcohol Prevention and Rehabilitation Act of 1970.

I have reviewed copies of relevant sections of state laws, executive orders, proclamations, etc., copies of which are hereto attached, and which consist of the following:

1. Letter from the office of the Governor dated March 8, 1971 directed to the Chairman of the Montana Alcohol and Drug Dependence Commission, Missoula, Montana.

2. Copy of directive from the Director, Department of Health and Environmental Sciences, Helena, Montana, directed to Hon. Forrest H. Anderson, Governor of the State of Montana, reference appointment of alcohol and drug dependence advisory council.

3. Copy of proclamation and letter from office of the Governor of the State of Montana dated December 17, 1971, directed to yourself, designating the Montana Department of Health and Environmental Sciences, John S. Anderson, M.D., Director, as the state agency to develop and administer the state plan as required by Section 303(a)(1).

4. Copy of Chapter 62, Laws of 1969, containing sections creating the Alcohol and Drug Dependence Commission.

5. Copy of Section 82A-602, R.C.M. 1947, with particular reference to subsection (3) whereby the Montana Commission on Alcohol

and Drug Dependence created in the title mentioned in subsection 4 hereof was abolished, and its functions were transferred to the Department of Health and Environmental Sciences.

On the basis of the review of the above material, it is my opinion the relevant provisions of Montana law provide sufficient legal authority in the Department of Health and Environmental Sciences to be designated as the single state agency which has the sole authority for the administration of the state plan under Public Law 91-616, and that the applicable provisions of Montana law are sufficient to accomplish the purposes required under Section 303(a)(2) of said public law.

Yours very truly,

ROBERT L. WOODAHL, Attorney General

By _____
Charles L. O'Donnell
Special Assistant Attorney General
Department of Health and Environmental Sciences
Board of Health Building
Helena, Montana 59601

CLO:ds

Encls.

ALCOHOL AND DRUG DEPENDENCE ADVISORY COUNCIL

To The

MONTANA DEPARTMENT OF HEALTH AND ENVIRONMENTAL SCIENCES

Robert L. Van Horne, Ph.D., Chairman.....Missoula

Miss Martha S. Herlevi, Vice-Chairman.....Red Lodge

Larry J. Schroeder, Secretary.....Billings

John W. Bauer.....Bozeman

Miss Jen Follett.....Whitefish

Mrs. Caroline Kelley.....Butte

Brinton B. Markle.....Helena

Ex-Officio Members

Stanley J. Rogers, M.D.
Director and Superintendent
Warm Springs State Hospital
Warm Springs, Montana 59756

Edwin G. Kellner, Director
Department of Institutions
Helena, Montana 59601

Theodore Carkulis, Director
Department of Social and
Rehabilitative Services
Helena, Montana 59601

Col. Robert H. McKay, Chief
Montana Highway Patrol
Helena, Montana 59601

Mrs. Dolores Colburg
Superintendent of Public
Instruction
Helena, Montana 59601

ADVISORY COUNCIL

John S. Anderson, M.D., Director of the Department of Health and Environmental Sciences, has administratively created the Montana Alcohol and Drug Dependence Advisory Council. The functions of this Council will be to advise the Department in carrying out the provisions of the Montana Alcohol and Drug Dependence Act, title 69, chapter 62, R.C.M. 1947. The purpose of the Council shall be to provide advice, to gather information, to make recommendations, and to consult with the Department in the establishment and carrying out of plans and programs.

The membership of the Advisory Council is essentially the same as the Montana Alcohol and Drug Dependence Commission which was its predecessor. In order to provide for continuity and to maximize the role of the Council, Dr. Anderson appointed the members of the Council from the membership of the Commission. The members of the Council will serve until November 30, 1973, and serve at the option and pleasure of the Director of the Department. Replacements or further additions to the Council may be made by the Director, and such appointments are registered with the Office of the Secretary of State upon the concurrence of the Governor.

The Council is at this time studying the possibility of recommending changes in the makeup of the Council. Such changes might include broader geographic, agency, and interest group repre-

sentation upon the Council. Such changes or recommendations in the makeup of the Council will be appended should they occur.

Members of the Council are as follows:

Robert L. Van Horne, Ph.D.
Dean of the School of Pharmacy
University of Montana
Missoula, Montana 59801
Phone: 243-0211

Dr. Van Horne has been chairman of the Commission since it was organized in 1969 and has been actively involved in alcohol abuse education and programming for a number of years.

John W. Bauer
512 W. Main
Bozeman, Montana 59715
Phone: 587-1415

Mr. Bauer is a faculty member in the Sociology Department, Montana State University. He has been active in alcohol education and rehabilitation programs and was involved in the development of the first half-way house in the State.

Miss Martha S. Herlevi
221 E. 11th
Red Lodge, Montana 59068
Phone: 446-2871

Miss Herlevi is a member of the League of Women Voters, the Lutheran Church, and the Montana Business and Professional Women's Association. The MBPW elected her Outstanding Woman of the Year for 1968. She is actively involved in alcohol education and has been a speaker before various groups throughout the State.

Miss Jen Follett
Box 196
Whitefish, Montana 59937
Phone: 862-3678

Miss Follett, a senior at Whitefish High School, served on the Family Life Council and in the Cultural Awareness Program as a Counselor, and has participated in a drug training program at Whitefish. She is the youngest person appointed by a Governor of Montana to a major State board or agency.

Larry J. Schroeder
204 Emerald Drive
Billings, Montana 59101
Phone: 248-6028

Mr. Schroeder is an architect in private practice and currently a member of the Board of Directors of the Rimrock Foundation, Billings, an alcoholism referral agency. He has also been active in the Yellowstone Council on Alcoholism.

Mrs. Caroline Kelley
111 W. Iron St.
Butte, Montana 59701

Mrs. Kelley is widely recognized for her work in prevention, treatment, and rehabilitative efforts directed toward alcoholism and alcohol abuse among the American Indians.

Brinton B. Markle
Director
Governor's Crime Control Commission
1336 Helena Avenue
Helena, Montana 59601

Mr. Markle is a graduate of the Law School of the University of Montana. He has been involved in the development, planning, and funding of alcohol programs relative to improving the Criminal Justice System in Montana.

The five ex-officio members of the Advisory Council are: Stanley J. Rogers, M.D., Director and Superintendent of Warm Springs State Hospital; Theodore Carkulis, Director, Department of Social and Rehabilitative Services; Edwin G. Kellner, Director, Department of Institutions; Col. Robert H. McKay, Chief, Highway Patrol; and Mrs. Dolores Colburg, Superintendent of Public Instruction.

Membership of the Council at this time is representative of the following interests and activities relative to alcohol abuse and alcoholism: Alcoholics Anonymous, State government, education,

professional education, local council on alcoholism, youth, Indian alcoholism programming, law enforcement interests, treatment and rehabilitation programs, private sector, and social and rehabilitative services.

Following the submission of the 1972 State Plan, it was recommended that the Advisory Council be broadened so that it was more representative of interests state wide. Several schemes have been proposed to provide for this broader geographic and interest representation. A suggested set of by-laws to do this follows. If these suggestions should be adopted, Dr. Anderson, Director of the Department, will request the concurrence of the Governor in the dissolving of the current Advisory Council. Following this Dr. Anderson will appoint a new Advisory Council to consist of 15 members. There would be 2 from each of the 5 catchment areas and 5 at large to be appointed by the Director of the Department, with the concurrence of the Governor.

There are several other possibilities for the development of the Advisory Council. With the implementation of the Office of Addictive Programs in the Office of the Governor, it has been proposed that a state-wide advisory council on addictive diseases be established, with 2 ad hoc or special interest advisory groups under it. One of these would be on alcohol abuse and alcoholism, and the other would be on other drugs and addictive diseases. The group working on alcohol abuse and alcoholism would then act as the advisory council for alcoholism programs and make their recommendations to the Governor's Advisory Council.

The Chairman of the Advisory Council has the usual duties ascribed to a chairman. He may call meetings of the Council, preside over such meetings using Roberts Rule of Order; and he may appoint members to standing or ad hoc committees. He serves as spokesman to the Council in matters between the Council and the Director of the Department of Health and Environmental Sciences and may be called upon by the Director to represent the Council in meetings and conferences both in Montana and out of the State. The Chairman of the Council is also utilized by the Departmental staff for guidance, technical assistance, and comments upon activities and operations of the Bureau.

DRAFT

BY-LAWS OF THE

MONTANA ALCOHOL ABUSE AND ALCOHOLISM ADVISORY COUNCIL

ARTICLE I

NAME

The name of the council is the Montana Alcohol Abuse and Alcoholism Advisory Council.

ARTICLE II

PURPOSE

The Advisory Council has been formed to provide advice, to gather information, to make recommendations, and to consult with the Department in the establishment and carrying out of plans and programs concerned with alcohol abuse and alcoholism.

ARTICLE III

MEMBERSHIP

SECTION I. MEMBERS. The Advisory Council shall consist of fifteen members appointed by the Director of the Department of Health and Environmental Sciences. There will be two members appointed from each of the five mental health catchment areas and five members appointed at large from throughout the State of Montana. Persons selected for membership on the Advisory Council shall be chosen to allow for a broad representation of population groups to be served, of governmental and employee groups, local citizens' groups, local and regional alcoholism programs as well as representatives of major socio-economic and ethnic groups.

SECTION II. TENURE. Members shall serve at the pleasure of the Governor. The existence of the council shall end at the end of two (2) years from date of creation of the council.

ARTICLE IV

MEETINGS

SECTION I. MEETINGS. Meetings shall be held quarterly and upon the call of the Director of the Department of Health and Environmental Sciences, chairman, or a majority of the council members. Meetings shall be held in Helena or other localities in the state as may be agreed upon by council members.

SECTION II. NOTICE. Notice of all meetings shall be sent by mail to the entire membership by the Secretary at least two weeks in advance of the meeting.

SECTION III. QUORUM. A majority of the membership constitutes a quorum to do business.

SECTION IV. CONDUCT OF MEETINGS. The chairman shall preside at all meetings and the meetings shall be conducted in accordance with Roberts' Rules of Order.

ARTICLE V

OFFICERS

SECTION I. OFFICERS. The officers of the Council shall be a chairman, vice-chairman, and secretary.

SECTION II. ELECTION, QUALIFICATIONS, AND TERM OF OFFICE. The officers shall serve until the first regular quarterly meeting of the members in the fiscal year and serve one-year terms. A vacancy in office shall be filled by majority vote of the membership for the remainder of the term of office.

ARTICLE VI

AMENDMENTS

The Council's by-laws may be altered, amended, or repealed and new by-laws adopted, in accordance with the Executive Reorganization Act of 1971 and other state and federal laws and regulations, by a majority of the members.

Reference: Section 82A-110, R.C.M. 1947

BACKGROUND INFORMATION

Montana is a land of contrast. The western third is mountainous while the eastern two-thirds are primarily flat and treeless. The Continental Divide separates these two regions, whose land surface of 147,138 square miles makes Montana the fourth largest State in the Union. The Divide stretches through Montana from Glacier National Park on the Canadian border to Yellowstone National Park in the south. While the average elevation in Montana is 3,900 feet, the highest point is Granite Peak (12,799 feet) in the Absaroka Mountains near Cooke City, and the minimum elevations are found in the Kootenai River Valley (1,820 feet) in the west and near Fairview (1,902 feet) close to the North Dakota line on the east. Contrasts are also found in population density.

Montana's residents are unevenly distributed over its vast area. The first settled western and central sections are still the most heavily populated, while eastern Montana is characterized by vast rural expanses. Nationally, the State ranks forty-first in population. During the last decade, the number of persons in Montana rose 2.9 per cent; the 1970 census figure was 694,409, representing 0.3 per cent of the nation. Of this number, 95.5 per cent were white; 4.2 per cent, Indian; and 0.3 per cent, black. Seven cities have over ten thousand people, but only two of these are SMSA with over fifty thousand inhabitants. These seven communities contain about a third

of the State's total population, while almost one half (46.6 per cent) of all Montanans live in communities of one thousand or less. Overall, there are only 4.7 persons per square mile. Economic ratings are also low.

Average cash income per Montana household, according to 1969 estimates, was $7,720 compared to $9,220 nationally. Montana's share of total national personal income was, as was its population share, 0.3 per cent. Montana ranked thirty-first in personal per capita income in 1968, a dramatic fall from twelfth place in 1950. In addition, the State's percentage of the total United States net personal income declined at a steady rate from 0.43 per cent in 1950 to 0.29 per cent in 1969.

Montana is called the "Treasure State" because it has many rich mineral deposits. Montana also relies on its agricultural resources. These pursuits form the backbone of the State's economy. Mineral production and forest products industries are located in the western and central areas. The short native grasses of eastern Montana provide a natural setting for raising stock, and large-scale farming and ranching predominate here. Total revenues from ranching and minerals are about equal. Other industries include manufacturing and tourism.

Agriculture, mineral production, and forest products industries all have a certain degree of hazard and accident potential inherent in them. Heavy construction, which has also been very widespread in Montana in recent years, also has an aura of risk about it. These types

of industries, which are conducted primarily in the out-of-doors, attract personnel who live a masculine, devil-may-care, rough and tumble way of life both to maintain an image and often by necessity to get the job done. The very nature of these kinds of work and the individual involved conjure the image of a two-fisted, hard drinking person. The role of alcohol and drinking among men employed in such occupations is very commonly accepted and considered to be part of the way of life.

Montana is a "heavy drinking" State. The per capita consumption of beer and ale is the fourth highest in the country, and the per cent of increase in per capita consumption is fifth highest in the country. There is one tavern for every 469 Montana residents. In addition to the rugged style of living mentioned earlier, Montana has seven Indian reservations with a total population that constitutes 4.2 per cent of the State population. The use of alcoholic beverage is disproportionally higher among the Indian residents as reflected by arrests for offenses involving alcohol. Of the arrests made in 1971, 41.7 per cent were Indian.

Montana legislators have long been concerned about the problem drinker in the State. In 1911 the first legislative action was taken in the establishment of the State Hospital with a unit specified for care and "treatment" of the alcoholic. No other funds were available until 1949 when $7,405.00 were made available to the Department of Health. In 1953, an Alcoholism Advisory Committee

was established but without funds and without authority. This body made numerous suggestions and recommendations; however, no funds have been available for implementation of an action plan.

Montana has a larger problem on a per capita basis than most of the other states. The problem is growing faster, on a per capita basis, than in most of the other states, and the economic base for funds is less than in most of the other states.

ALCOHOLICS IN MONTANA

Estimates of the number of alcoholics in the general population vary between the several sources of information. Dr. Morris Chafetz, Director of the National Institute on Alcohol Abuse and Alcoholism, uses the figure of five per cent of the general population. This would indicate that there are some 34,720 alcoholics in Montana. He also indicates that the incidence of alcoholism among Indians varies from ten per cent to fifty per cent. Montana has seven Indian reservations that together constitute 4.2 per cent of the state population. A projected figure of Indian alcoholism in Montana would substantially increase the state total of alcoholic persons. The Social Research Group at George Washington University uses a figure of 8.15 per cent of the general population. This would show 56,663. They do not make special reference to Indians.

All of the indications of alcohol consumption, alcohol related accidents, and other indicators are apparently showing

increases; for example, the per capita consumption in Montana is showing an annual increase and at that is only surpassed by three other states. As a result, the percentage of alcoholics in Montana would be substantially higher than the 8.15% figure used for the general population by the Social Research Group. Because of this, we have projected the 8.15% figure upward to 8.50% for planning purposes. This then gives the following estimates:

8.5% of population (except Indian)	57,902
50% of Indian population	13,565
Total	71,467

Ripple effect, others affected -- 285,868

PRIORITY RANKINGS BY MENTAL HEALTH CATCHMENT AREA

Each of the five catchment areas was ranked on six separate criteria scales. Those rankings were submitted as a supplement to the FY72 State Plan and were included in a letter to William C. Reeder, State Assistance Branch, NIAAA, dated June 13, 1972.

Since that date the ranking procedure has been reviewed and now considers the grant-in-aid funds from the FY72 formula grant that were allocated into the five catchment areas. It also considers other identifiable funds from various sources that have been applied to the alcoholism problems in each catchment area.

The ranking scales, the scores, the tabulations and the ultimate catchment area priority rankings for FY73 funds and other assistance are shown on the following pages.

CATCHMENT AREA RANKING

Rating Scale 1-5; 1 is High, 5 is Low

This ranking is based on the highest relative degree of need in the five catchment areas combined with the highest relative degree of capability for meeting that need.

CATCHMENT AREAS

	I	Rank	II	Rank	III	Rank	IV	Rank	V	Rank
1. Greatest population to be served	154,691	2	146,737	3	167,100	1	133,665	4	92,152	5
2. Greatest area in sq. mi.	19,717	5	26,108	3	28,576	2	24,859	4	47,591	1
3. Greatest population per sq. mi.	7.8	1	5.6	3	5.8	2	5.4	4	1.9	5
4. Greatest amount of alcohol planning as reflected in federal dollars	$138,366	5	$624,483	1	$334,978	3	$140,198	4	$429,241	2
5. Greatest number of alcohol abusers	13,148	2	12,472	3	14,203	1	11,360	4	7,833	5
6. Greatest number of Indian residents	3,937	4	10,077	1	1,541	5	5,122	3	6,453	2
7. Greatest income per capita	2,654	4	3,406	1	2,569	5	2,760	3	3,093	2
8. Greatest degree of comp alcoholism programming		5		5		1		5		5
9. Greatest degree of comp alcoholism planning		5		1		1		5		5
10. Mental health catchment priority ranking		2		3		3		4		1
TOTAL		35		24		24		40		33
PRIORITY		3		1		1		4		2

POPULATION DATA BY CATCHMENT AREA

Catchment Area	Total Pop.	Sq. Mi.	Population Density Per Sq. Mi.	Indian Population		Other Population	
				Total	Drinking Age 15 yrs. & Over	Total	Drinking Age 15 yrs. & Over
1	154,691	19,717	7.8	3,937	2,349	150,754	108,296
2	146,737	26,108	5.6	10,077	5,560	136,660	100,143
3	167,100	28,576	6.0	1,541	863	165,559	120,691
4	133,665	24,859	5.3	5,122	2,916	128,543	94,227
5	92,152	47,591	1.9	6,453	3,661	85,699	63,078
Total	694,345	146,851	4.7	27,130	15,349	667,215	486,435

Source: U.S. Census, 1970

UTILIZATION OF 1973 FORMULA FUNDS

The utilization of the formula grant monies available to the State of Montana for the fiscal year 1973 as authorized by P. L. 91-616 is as follows:

1.	Training		$ 20,000
2.	Survey of Need		15,000
3.	Action Monies		125,000
	Grants-in-aid	$110,000	
	Contingency funding	10,000	
	Educational materials	5,000	
4.	Staffing		20,000
5.	Administration		20,000
			$200,000

A further explanation of the utilization of these funds is detailed in the following discussion.

ALLOCATION OF FORMULA GRANT FUNDS

Formula grant funds allocated to the State of Montana under the formula grant provisions of Public Law 91-616 amount to $200,000 for Fiscal Year 1973. The allocation of that $200,000 will be broken down as follows:

Action monies will be provided in a total amount of $125,000.

Of this $125,000, $110,000 will be for contracts and consultation related to evaluation and to measurement of program effectiveness of local or regional programs. These monies may also be used on a catchment area wide basis to develop program proposals and to purchase technical assistance and develop program proposals. Consideration will be given to previously funded programs for new program components or for evaluation and measurement of program effectiveness in terms of the programming that they have been operating.

This $110,000 will be divided as follows: $26,000 will be allocated to each of the five catchment areas. A program or application from any one applicant within the catchment area will have a dollar limit of $10,000 per single agency project. Applications from within a catchment area will not be limited in number, but the total amount awarded per catchment area will not exceed $26,000.

$10,000 of the monies allocated within this broad category will be used on a discretionary basis for emergency funding of programs and activities of a short term nature or to provide for interim funding.

Such discretionary funding will take place upon the receipt of an application in a form to be developed by the Department and may be funded following staff review and approval by the Director. Such funding will be of an extreme short term nature, of the nature that might be deemed emergency, or might provide an interim or band-aid type of funding.

Another $5,000 of the money in this broad category will be allocated as follows: $1,500 will be allocated to the Alcoholism Services Center at Galen State Hospital, a unit of the Montana Department of Institutions, to purchase audio visuals and library materials for utilization at the Alcoholism Services Center program conducted by the State of Montana. The balance of the $5,000 will be utilized by the Alcohol and Dependent Drug Bureau of the Department of Health and Environmental Sciences, to purchase films and audio visual materials to be placed in the departmental film library and to be made available to citizens of the State through the usual film library procedures. These audio visuals will be available on a loan basis to local programs throughout the State. Other use of this $3,500 will be to buy pamphlets and literature in volume so that they may be distributed to local programs at a minimal cost to provide for a maximum utilization of the monies available to purchase such materials.

$15,000 of the formula grant monies will be allocated to the continuing survey of need and for evaluation of currently existing program activities, both at the local level and at the state level.

It will be necessary to continue activities aimed at defining level of need, and understanding and interpretation of need on the part of both state and local program personnel boards, and individuals. This will also provide a limited amount of funding so that evaluation may be carried out by direct service from this Department or through contractual arrangements with other agencies within the State of Montana or from outside the State. These evaluative efforts would be carried out by the Alcohol and Dependent Drug Bureau of the Department of Health and Environmental Sciences. This would not supersede or eliminate the need for evaluation that could be contracted by local program.

Training of professional, para-professional and developing personnel is still the high priority in the Montana State Plan and consequently money is being allocated for this purpose. The amount of $20,000 will be allocated from the 1973 State formula grant for training purposes.

During our recent program visits throughout the State, we have talked with numerous Board members of local programs who were uninformed about current aspects of alcoholism programming. We strongly believe that Board members should be conceptually ahead of their staff instead of lagging behind. We will encourage Board members to take advantage of training opportunities.

Funds will be made available for travel and per diem expenses for Board members and community program representatives to attend the training program "Seminar on Alcoholism Control" to be conducted jointly by the Department, the Western Branch of the American Public Health Association, and the continuing education program of the American Public Health Association. Expenses to be covered will be travel and per diem and will be reimbursed to those persons invited to attend the seminar which will be held during 2 specific training times in the spring, 1973.

The Regional Office and the State alcoholism authorities throughout Region VIII are jointly planning a special training program. This training program will address itself to the needs of Board members and program staff. The Board members and key staff of local programs will be invited to participate in this series of training programs.

Short term training in recognized programs such as the Utah Summer School of Alcohol Studies, the International School of Alcohol Studies in North Dakota, seminars and training institutes of similar nature will be given consideration for funding. Travel and per diem expenses at prevailing state rates will be paid, as well as registration fees for successful applicants. Applicants for such reimbursement must show acceptance by the particular training program in their application to this Department, and must show that the training is relevant and applicable to their particular work situation.

A limited number of grants to pay travel, per diem, and registration fees will be made available for attendance at the annual meeting of the Alcohol and Drug Programs Association of North America, to be held in Minneapolis in the fall of 1973. Such grants will be for alcoholism program directors, staff, or Board members. The applicants for such grants will follow the procedure outlined in the paragraph above.

Short term seminars, training programs, and the like for personnel of related programs in communities will be encouraged. Such programs of several days to a week in length being conducted either by local alcoholism programs, local colleges or university units will be encouraged and will be funded within a reasonable dollar figure. A resume of the proposed program and a proposed budget should be submitted to the Department for consideration as early as possible.

Individual circumstances will be evaluated for funding. Funding will also take into consideration the priority of the catchment area from which the applicant applies. Applicants should consider contacting the Bureau as early as possible in the application procedure to the specific training program to assure that there is a possibility of funding being made available through the Bureau. The Bureau itself will conduct training as necessary and has made tentative arrangements with specific training programs and will provide scholarships in the form of per diem and travel expenses to such training. Such training will be either clinical or of a specialized nature. The Bureau will not pay the salaries of the personnel from local programs during the training

periods. They must remain on salaries of the local program during any period of training, and must return to that program following training.

$20,000 of the state formula money will be utilized by the Department of Health and Environmental Sciences, Alcohol and Dependent Drug Bureau, in the following manner: Increased demands for technical assistance, data collection, and evaluation of proposals and grant applications have put extreme demands on the personnel currently available to the single state agency. A portion of this $20,000 would be utilized to hire a person to provide technical assistance and program consultation. This person would be hired at the Health Educator II level if qualified, but if not qualified at that level, would be hired at a lower Merit System level. A portion of these funds would pay for necessary travel and training for such an individual. The balance of the funds would be utilized to hire a person with the Merit System title of Administrative Aide I. This person would have the responsibility for keeping the records concerning grant-in-aid funds allocated to local programs and activities, and many of the activities currently being carried out by the professional staff of the Bureau. This would free the professional staff of the Bureau from some of these duties and would make more of their time available to provide direct service, consultation, and community organization services to local programs and boards. The utilization of this amount of the state formula monies is of a major priority to this Department.

Our original understanding of the utilization of administrative monies was taken in the very limited sense, and so consequently we are planning on utilizing the 10% or $20,000 for administrative purposes.

Ten percent of the formula grant allotment is being requested to pay for administration of the State plan. Costs to be covered by this amount of money include:

1. Salary and fringe benefits for Health Educator III, administrative title of Program Representative, who will work full-time on development and administration of the plan;

2. Materials and services such as printing, xerox, and photocopying, telephone, rent, expendable and deskton supplies, minor office equipment;

3. Portion of salary of Clerk-Stenographer II.

4. Staff travel in development and administration of State plan.

5. Expenses of Alcoholism Advisory Council, per diem and travel at rates not to exceed those authorized by State statute;

6. Consultation and technical assistance;

7. Agency membership in alcoholism organizations.

APPLICATION, REVIEW, AND FUNDING PROCEDURES FOR FUNDS TO BE MADE AVAILABLE FROM THE FORMULA GRANT

All agencies in the State providing services for the alcohol abuser, the alcoholic, and their families will be encouraged to submit applications for funding of programs within the priorities established in this plan. Application will be made in a format to be developed by this agency and made available upon request to the applicant. Such application will be specific in requesting funding from formula grant monies.

Applicant agencies or programs will be required to provide the following information:

1. Agency identification including name of the agency, name of the director or responsible individual, address and telephone number, and evidence of non-profit status and tax exempt status.

2. A brief statement of purpose and the objectives of the project for which funding is requested.

3. A line-item budget for the proposal. Applicant will be required to record all sources of program monies although a match situation is not required for these formula funds.

4. A brief narrative description of the proposed activity showing its correlation or coordination with other alcoholism programs and activities in that community or region. If there are affiliative or cooperative arrangements, they should be specifically outlined.

A description of evaluative methods to be applied will also be required.

Upon receipt of the application in the office of the Alcohol and Drug Dependence Bureau, the application will be given an identification number. Following a brief staff review, those proposals or applications not meeting minimal requirements or criteria as specified in this plan will be returned to the applicant for further information and re-submission.

Those proposals that staff feel have satisfied basic informational requirements will then be scheduled for Advisory Council review. The program director and the chairman or president of the Board of Directors or Advisory Council will be invited to present their program proposal to the Advisory Council. Sufficient time will be alloted so that the applicant will have ample opportunity to present his proposed activities and to permit the Advisory Council a reasonable length of time for question and discussion concerning the proposal. If the review committee feels that further information is necessary, this will be done through either a site visit or further meetings of the applicant with the review committee.

If the action of the review committee is favorable, such recommendations will be made to the Department, and an award will be made to the applicant agency from the formula grant funds. Indications of the award, any conditions on the award, and the first set of draw down forms will be sent to the applicant. Draw down procedures for the full amount of the grant made may be on a monthly,

quarterly, or total basis, depending on the amount of the award.

Should the review of the proposal not be favorable, then two alternatives will be open to the applicant. One would be to re-submit the proposal including recommendations made by the review to the Director for his action.

All applicants for monies available under the formula grant program will be required to provide the usual assurances of non-discrimination, evidence of maintenance of effort and broad-based community support, and others such as acceptable accounting and fiscal procedures, etc. Reports will be required at specific intervals and in a form to be developed.

ASSURANCES

MAINTENANCE OF EFFORT. The State of Montana hereby provides assurance that Federal funds will not supplant non-Federal funds that may be otherwise available for provision of the services and carrying out the activities under this plan. Such funds will, to the extent practical, be used to increase the level of funds otherwise available for such services and activities.

MERIT SYSTEM. The Montana Department of Health and Environmental Sciences is a participating agency in the Montana State Merit System Plan. This Plan is developed and administered in accordance with "Standards for a Personnel Merit System", 45 EPR, Part 70.

NONDISCRIMINATION. All services provided under this State plan will be made available without discrimination on account of race, creed, color, sex, marital status, or duration of residence.

The Department of Health and Environmental Sciences and any other agency, organization, or institution carrying out any authority under the State plan shall not discriminate in any way against any employee with respect to compensation, terms, conditions, or privileges of employment solely because of race, color, creed, sex, or national origin, nor shall they refuse employment to any qualified applicant for a position solely on the basis of the fact that he or she had or

has not had a problem of alcohol abuse or alcoholism.

No formula grant funds will be awarded to public or private general hospitals which have received Federal funds for alcoholic treatment programs and which refuse admission and treatment to alcoholic persons solely on the basis of their alcoholism.

ACCESSIBILITY. All the services provided under this plan will be so publicized as to be generally known to the population to be served, and will be available and responsive to the needs of those to be served, and will be so located as to be readily accessible to the population to be served.

DIRECT SERVICES. This Bureau does not supervise any other agencies, nor does it operate or carry out treatment or rehabilitative program activities. No employee of the Department of Health and Environmental Sciences nor any firm, organization, or corporation receives funds from any applicant directly or indirectly in payment for services provided in connection with the Montana State Plan for Alcohol Abuse and Alcoholism. Applicant agencies requesting subgrant funds will be required to submit a similar assurance.

SUBMISSION, REVIEW, AND APPROVAL OF THE STATE PLAN. The State plan will be reviewed and updated or revised as necessary, at least annually. The Plan will be modified during the year if such modification is deemed necessary, and also as new or revised data

or information is available, any revisions or updating will be subject to the same review procedure as the plan itself.

In years subsequent to this original submission, the procedure to be followed in the submission and review of the plan will be as follows:

As soon as possible following submission of the plan for fiscal year 1973, staff revision and updating of the document will begin. The plan for fiscal year 1974 will be developed and prepared for review by the Advisory Council as early in the fiscal year as is practical.

Following Council review and comments, the documents will be made available for public review and comment at the Executive Office of the Department of Health and Environmental Sciences, Cogswell Building, Helena, Montana, as well as the office of the Alcohol and Drug Dependence Bureau of the Department. Such availability will be announced through a description of the plan and a notice of its availability, which will be published 30 days prior to submission for approval.

Following this 30 day review period, copies will be submitted to the Office of the Governor and to the State Department of Planning and Economic Development for their review and comments relative to the relationship of this plan or any modification of the plan to comprehensive and other State plans and programs and will provide the Department of Health, Education, and Welfare with their comments.

The Department of Planning and Economic Development is the State Clearinghouse as required by Part III of the revised Office of Management and Budget Circular A-95. Forty-five days will be allocated for such review, and any comments or statements that there are no comments will be submitted with the plan.

Submission of the plan will be by registered mail to the Regional Health Director, Regional Office, Department of Health, Education and Welfare, Denver, Colorado in such numbers of copies as they may require.

ACCOUNTING PROCEDURES. Accounting procedures necessary to assure proper disbursement of and accounting for funds paid to the State under this formula grant program have been established by the Central Services Division of the Department. Funds allocated to Montana in the Alcohol formula grant program under Public Law 91-616 will be clearly delineated from those obtained under other Federal formula or project grant programs. To this point, the budget number for this program has been established as 0451, Alcoholism Grant Program, for fiscal control purposes.

All records will be kept for such periods of time as deemed necessary for completion of Federal Audit as specified in the Guidelines for the Formula Grant Program under Public Law 91-616.

Fiscal records relative to the use of funds made available

under Public Law 91-616 shall be made available to inspection and fiscal audit at reasonable times by persons designated by the Secretary.

REPORTS. Annual progress and expenditure reports shall be submitted as may be required, to the Associate Regional Health Director, Department of Health, Education, and Welfare, Region VIII, Denver, with a copy to the Director of the National Institute on Alcohol Abuse and Alcoholism.

RESOURCES

The Montana facilities and programs that serve the alcohol abuser, the alcoholic and the involved family members are wide spread in scope, in nature of service, and in location. The range of services include information dissemination, preventive efforts, treatment plans, half-way house facilities, one comprehensive community alcoholism treatment center, and one state-funded treatment program. These services, programs, and facilities are located throughout the State with concentrations in the urban areas.

The programs serving the alcohol abuser in Montana are funded in a variety of ways. One is a state operated and funded program, some are funded with federal monies, i.e., NIAAA, LEAA, some by private monies, some with combinations of funding sources and some with almost no funding at all.

Little information of an evaluative nature is available regarding the effectiveness of these programs in terms of their stated goals and objectives. The two poverty programs previously funded by OEO and transferred to NIAAA have been evaluated by a consultant from the National Council on Alcoholism. The Alcohol Treatment Center, headquartered in Helena, was recently visited by an NIAAA site visit team and a comprehensive week long site visit was carried out by that team. Most of the other programs currently operating in the State have not been evaluated and have almost no evaluative component built into their program.

One area of evaluation that has been carried out has to do with the physical facilities being utilized by the programs throughout the State. Those that are operating in-patient facilities and half-way house facilities have been inspected by the Hospital and Medical Facilities Division of the Montana Department of Health and Environmental Sciences for compliance with recognized health, fire, and life safety standards. None of the half-way houses currently operating on provisional licenses in the State of Montana comply with minimum fire, health, and life safety standards. Many of them have problems that can be corrected with paint, new counter tops, and similar minimal involvement of man power and money.

Several of the programs have up-graded their physical plants by moving into facilities that are superior to the buildings they occupied last year. Some of these buildings still have safety problems, but not of the magnitude that was evident one year ago. This is a decidedly measurable improvement.

AGENCY - Montana Department of Health and Environmental Sciences
Cogswell Building, Helena, Montana 59601
John S. Anderson, M.D., M.P.H., Director

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
Alcohol and Drug Dependence Bureau Robert L. Solomon, Chief Helena, Montana 59601	FY 1970 - $12,000(State) 1971 - 12,000(State) 15,000 (GCCC -LEAA) 1972 - 25,049 (State) 16,269 (GCCC -LEAA) 1973 - 25,000 (State) (All of the above are both alcohol and drug moneys: 50% alcohol - 50% drug).	Coordination and promotion of alcohol and drug dependence programming; prevention, treatment, rehabilitation, education, research, planning, technical assistance, Grant review.
	1972-PL 91-616 Formula grant (NIAAA) $200,000	State Alcoholism plan
	1972- Occupational Alcoholism grant (NIAAA) 45,592	Occupational alcoholism program state and local government and private industry.
	1972 - Montana Board of Crime Control (LEAA) 100,000 (73,260 alc) (26,740 drug)	Sub-grant program
Laboratories Division David Lackman, Ph.D., Administrator Phone: 449-2642	1972 - 76,737 (DOT) 1973 - 40,354 (DOT)	Alcohol and drug detection program for operators of motor vehicles on the public highways of MOntana
Health Education Bureau Mrs. Maxine Homer, Chief Phone: 449-3444		Film library, educational source materials.

STAFF DEVELOPMENT - SINGLE STATE AUTHORITY

Provisions have been made for appropriate in-service training and staff development within the Alcohol & Dependent Drugs Bureau of the Department of Health and Environmental Sciences. This professional in-service training will be particularly important in the program of training and other services to the target areas of the state.

Three of the four professional staff in the Alcohol & Dependent Drugs Bureau have attended the National Alcoholism Training Program for professionals sponsored by the Social Science Institute of Washington University in St. Louis, Missouri. In addition, two occupational program consultants in the Bureau staff participated in the National Institute of Occupational Alcoholism Training Institute at Pinehurst, North Carolina, a two-day regional training seminar in Occupational Alcoholism held in Denver and a week-long seminar on Occupational Alcoholism in San Francisco as part of this training program. They also attended the Cal-Tech Seminar on Industrial Alcoholism in Pasadena, California.

The Bureau Chief has participated in the Site Visit Training Program sponsored by the National Institute of Alcoholism & Alcohol Abuse and has served in a Site Visit Team for NIAAA.

The Bureau staff, in addition to these formalized training activities, are undergoing a continuous in-service training function through review of literature related to alcoholism, alcohol rehabilitation, program development, health planning, behavioral sciences,

and health services delivery.

This professional education upgrading for the Bureau staff will continue to be an important function in the Alcohol & Dependent Drug Bureau of Montana Department of Health and Environmental Sciences. In-service training and staff development to other bureaus and divisions of the Department will be made available as requested by program administrators or as deemed necessary by the Director.

MONTANA STATE OCCUPATIONAL ALCOHOLISM PROGRAM

#1-R18 AA00119-01

6/1/72 - 5/31/73

The Occupational Alcoholism Project is described in two sections. The first section is devoted to the goals, objectives and philosophical reasons for the program.

The second section is a detailed progress report giving information regarding the actual methods being used to implement the project, and the results that have been accomplished.

OCCUPATIONAL ALCOHOLISM PROJECT - GOALS AND OBJECTIVES

This project which began June 1, 1972 is currently being funded under a grant from the National Institute of Alcohol Abuse & Alcoholism and will continue for a three year period.

The grant provides for two Program Representatives who will be responsible for the development of Occupational Alcoholism Programs within state and local governments and private industry.

These individuals have been trained at a three week National Occupational Alcoholism Training Institute seminar conducted by East Carolina University, Greenville, North Carolina with follow-up training sessions on a regional and national level.

There has been a considerable amount of acceptance by many of the private industries throughout the state and rightly so due to

the devastating affect that alcoholism has on the industries within the state. It is estimated by the National Council on Alcoholism that this disease costs the employer approximately $3,750 per alcoholic employee due to lost time, rework of errors, loss of efficiency, accidents, etc. and approximately 10% of the employed people are afflicted with the disease of alcoholism.

The Department of Health & Environmental Sciences has issued a policy statement recognizing alcoholism as a disease and those afflicted will be able to use sick leave for treatment as with any other illness (copy appended). In the immediate future it is hoped that all state and local governments will adopt a similar statement which will affect 40,000 employees. Policy Statements for the private sector are currently being formulated. As of January 1, 1973 these Policy Statements encompass an employed population of 37,000 which is a small percentage of the total of 140,000 who are employed in private industry. A considerable amount of education is being undertaken and will be continued since there are a number of employers who are still unwilling to accept reality that they have alcoholics or alcohol abusers within their employ.

Of the total 190,000 employed population in the State of Montana there are 11,504 who are Federal employees. The Federal Government requires that each of their agencies maintain an alcoholism program. These programs are directed administratively through their regional headquarters in Denver, Colorado.

Occupational Alcoholism Program (continued)

The primary thrust of the continuing program is the development of state-wide programs within private industry, a uniform alcoholism policy for State Governments and the implementation of a consistent identification and treatment program for all governmental employees.

OCCUPATIONAL ALCOHOLISM PROJECT - PROGRESS REPORT

Pursuant to the provisions of Public Law 91-616 and Section 246 Community Mental Health Centers Act, a Research Grant was obtained in the amount of $49,672 first year funding to cover direct and indirect costs in the initiation and implementation of the Montana State Occupational Alcoholism Program for the period of June 1, 1972 to May 31, 1973. The total grant approved will cover a three year period from July 1, 1972 to May 31, 1975.

The Bureau Chief recruited two (2) Program Representatives through the State Merit System. The Program Representatives attended the training program for Occupational Program Consultants conducted by the National Occupational Alcoholism Training Institute of Eastern Carolina University at Pinehurst, North Carolina from June 11, 1972 to July 1, 1972. A regional training session at Denver, Colorado was attended October 16 - 17, 1972 and a national training seminar at San Francisco November 26 to December 1, 1972. One Representative attended the National Alcoholism Training Program for Professionals

Occupational Alcoholism Program (continued)

conducted by the Social Science Institute, Washington University, St. Louis, Missouri, January 14, to January 19, 1973. Appropriate administrative support was furnished with funding for one (1) clerical position, office space, equipment, telephone and travel as well as applicable educational, training and promotional materials.

The use of funds provided is limited to staffing and training for program activity directed specifically for employed persons in the industrial as well as the government sector on a state and local basis. Support is provided in a consultive role by the NIAAA staff at national and regional offices.

The Montana program is oriented toward the development of cooperative efforts between all levels of management and employees toward the understanding of the problems created by alcoholism and alcohol abuse and efforts to identify and direct the afflicted individual and his family to appropriate state, regional and local resources, both public and private. Resources now being utilized include the various agencies and operations of the State government, labor and craft unions, management and employees associations, professional associations and other groups that may be developed as the project grows. Prevention, treatment and rehabilitation facilities currently existing such as those at Montana State Hospital, Warm Springs, the Alcoholism Rehabilitation and Treatment Center at Galen, comprehensive mental health centers, and local alcoholism programs will be utilized as resources and referral points for the programs

Occupational Alcoholism Program (continued)

and activities being implemented by the project staff. Coordination with existing health and employee safety and education programs, personal counseling programs and industrial alcoholism programs will be consistently fostered in program development.

An education and training effort to acquaint the public with current information on the program, its activities, objectives and results on an ongoing basis makes use of all feasible techniques and methodologies of communication to enhance community interest, involvement and support for this and all related educational, treatment and service activities, public and private.

The two (2) Program Representatives are working jointly to implement programming for state agencies, most of which are headquartered in Helena. Due to demographic factors of population density and distribution, the State has been assigned to the individual Program Representatives by catchment area with the three western catchment areas of 29 counties the responsibility of one Program Representative, and the remaining two eastern catchment areas of 27 counties the responsibility of the other Representative.

Results to date of the Occupational Alcoholism Program are reflected in the following:

(1) A comprehensive in-service training program for staff.

(2) Adoption by the State Department of Health and Environmental Sciences of a policy that recognizes alcoholism as a disease with personnel procedures resulting from this concept.

Occupational Alcoholism Program (continued)

(3) Involvement of organized labor in support of the program by the joint AFL-CIO State Executive Board and its Executive Director through frequent contact, furnishing program material and a 7-page insert in the Montana State AFL-CIO Convention Program.

(4) Conducting training sessions for staff and Board Members of existing information and referral, treatment and rehabilitation programs throughout the State.

(5) Program presentations for state agency staffs, supervisors, safety directors, etc.

(6) Coordination and consultive services to ongoing programs in federal agencies and military installations.

(7) Upgrading of quality of program and staff for resource programs through education, training and consultive services.

(8) Staff input in improving delivery of services by groups funded under formula grants, MIAAA, OEO, and LEAA.

(9) State-wide distribution of appropriate program material.

(10) Extensive emphasis on community involvement, input and participation in development of programs as a result of surveys of need and continuing program evaluation of program needs, structure and methodologies.

(11) An ongoing effort to elicit the support of the executive branch of Montana Government to support a program in all sectors of state government through adoption of a uniform policy for all state agencies with sufficient clout for its implementation.

Occupational Alcoholism Program (continued)

(12) Development of catchment area profiles on population, age groups, sex, race, employment etc. to point up major areas of need and emphasis.

A proposal for the implementation of a "troubled people" program was presented to the Anaconda Company, which is the largest single, private employer in the State of Montana. The program would involve the almost 6,000 employers and their 18,000 dependents. The program is now receiving top management approval and being budgeted for early activation.

HIGHWAY ALCOHOL PROGRAM
Section III

This program is carried out under contract with the Federal Department of Transportation through the Highway Safety Division of the Department of Intergovernmental Relations. The legal authority is contained in Section 32-2142.3, R.C.M. 1947, the "Implied Consent Law"; and Board of Health and Environmental Sciences regulation 60.002, Quality Control of Alcohol Analyses. The contract and amendments for 1972 were for expenditures of $76,835 in the laboratory.

For this the following was accomplished:

1. 15 Alco-Analyzers were purchased and 14 of these were set up for operation in the following police departments: Billings, Bozeman, Butte, Glasgow, Glendive, Great Falls, Helena, Havre, Kalispell, Lewistown, Miles City, Missoula, Shelby, and Wolf Point. One outfit was retained in our laboratory for processing Sobermeters.

2. Over 200 law enforcement officers were given training and were certified as operators or operator-supervisors of Alco-Analyzers.

3. Several training sessions were held at the Police Academy on alcohol analysis in connection with "Implied Consent".

4. Many training sessions on collection of specimens by use of the Sobermeter SM-7 were held.

5. 2500 Sobermeters were placed in law enforcement vehicles and in police stations.

6. A Varian 2800 gas chromatograph was purchased and set up for reference work. The chemist in the program attended a special training course on this instrument. One of its greatest uses is for determination of carbon monoxide levels in blood and for drug detection. (These are two areas we are adding to our highway program).

7. Here is a summary of analyses performed (the program didn't get into full swing until December):

	NUMBER	NUMBER POSITIVE (equal to or greater than 0.10%)
Breath samples shipped to our laboratory on Sobermeters	427	402
Breath analyses done by law enforcement officers on Alco-Analyzers	585	567
Blood shipped to our laboratory	759	560
Urine shipped to our laboratory	362	344
TOTALS	2133	1873

8. The chemist in charge of this program has been involved in numerous court appearances and is very effective because I don't believe he has "lost a case".

The program to provide laboratory back-up for law enforcement officers in connection with "Implied Consent" has been a most successful one. Two major factors contributing to this are the quality of personnel assigned to the project and adequate financing to "get it off the ground". Some indication of how the program is being received locally is contained in excerpts from a letter of October 16 from Robert K. Johnson, Chief of Police, Bozeman, to Mike Harrington, chemist in charge of the program.

> "From January 1, 1972 to September 30, 1972, we have successfully prosecuted 67 D.W.I.'s through our Police Court. The month of September 1972 alone we accounted for 17 of these convictions.
>
> In checking figures in the past years, we found that a total of 79 convictions on D.W.I.'s was obtained for the years 1968, 1969, 1970, and 1971.
>
> I feel that the primary reason on our success to D.W.I.'s is the fact that the State furnished this Department with the gas chromatograph and the training for the officers so that they could take advantage of this piece of equipment.
>
> There is no doubt in my mind that if these drinking drivers had been allowed to continue to drive on the streets of Bozeman and the highways of Montana, that our fatality rate would have been higher."

ALLOCATION OF FUNDS AWARDED BY THE DEPARTMENT OF HEALTH & ENVIRONMENTAL SCIENCES

FROM MONTANA BOARD OF CRIME CONTROL, SUBGRANT PROGRAM #2-6136

PROJECT NAME	AGENCY FUNDED	AMOUNT	DATES OF PROJECT
Providence Resocialization Center	City of Great Falls	$ 21,383	9/1/72 to 3/31/73
Big Sky Half-Way House	Yellowstone County	$ 13,140	9/1/72 to 8/31/73
Frontier Half-Way House	Beaverhead County	$ 5,400	11/1/72 to 10/31/73
*Wesley Center	Cascade County	$ 17,440	12/1/72 to 11/30/73
Miles City Half-Way House	City of Miles City	$ 14,970	11/1/72 to 10/31/73
Northwest Montana Alcohol and Drug Information and Referral Center	Flathead County	$ 18,367	11/1/72 to 10/31/73
*Billings Drop In Center	Yellowstone County	$ 9,300	11/1/72 to 10/31/73
		$100,000	

* Drug Programs

ADDS 2/73

MONTANA DEPARTMENT OF INSTITUTIONS
EDWIN G. KELLNER, DIRECTOR
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Division of Mental Hygiene
Stanley J. Rogers, M.D.
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Warm Springs State Hospital
Phone: 693-2221

Willis Crosswhite, Administrator
Warm Springs State Hospital

Miguel Gracia, M.D.
Warm Springs State Hospital
Clinical Director and Director
of the Forensic Unit

Stanley J. Rogers, M.D.
Director (acting) Western Treatment Unit

Harry Xanthopoulos, M.D.
Director (acting) Central Treatment Unit

Harry Xanthopoulos, M.D.
Director of Eastern Treatment Unit

Alcohol Treatment and Rehabilitation Program
Edward Gendle, Director
Alcoholism Services Center
Phone: 693-2281

Jack Balcombe
Community Services Consultant

Richard E. Fanestil
Coordinator of Aftercare and Referrals

AGENCY - Division of Mental Hygiene
Stanley J. Rogers, M.D., Director and Superintendent
Warm Springs State Hospital, Warm Springs, Montana 59756 (Phone: 693-2221)

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
Warm Springs State Hospital Miguel Gracia, Clinical Director		Acute Detoxification Medical and Psychiatric Evaluation
Alcohol Treatment and Rehabilitation Program Alcoholism Services Center Galen, Montana Edward Gendle, Director	FY 71 $ 85,270.73 (State) FY 72 $118,171 FY 73 $ 99,040 FY 74 $105,119 FY 75 $110,127 Warm Springs Budget for Alcoholism Services including Alcohol Treatment Center at Galen	In-patient treatment, counseling and rehabilitation Public and professional informat Community Consultation Alcoholism Counselor Training

ALCOHOLISM SERVICES CENTER
ALCOHOL TREATMENT AND REHABILITATION PROGRAM
MONTHLY REPORT - NOVEMBER 1972

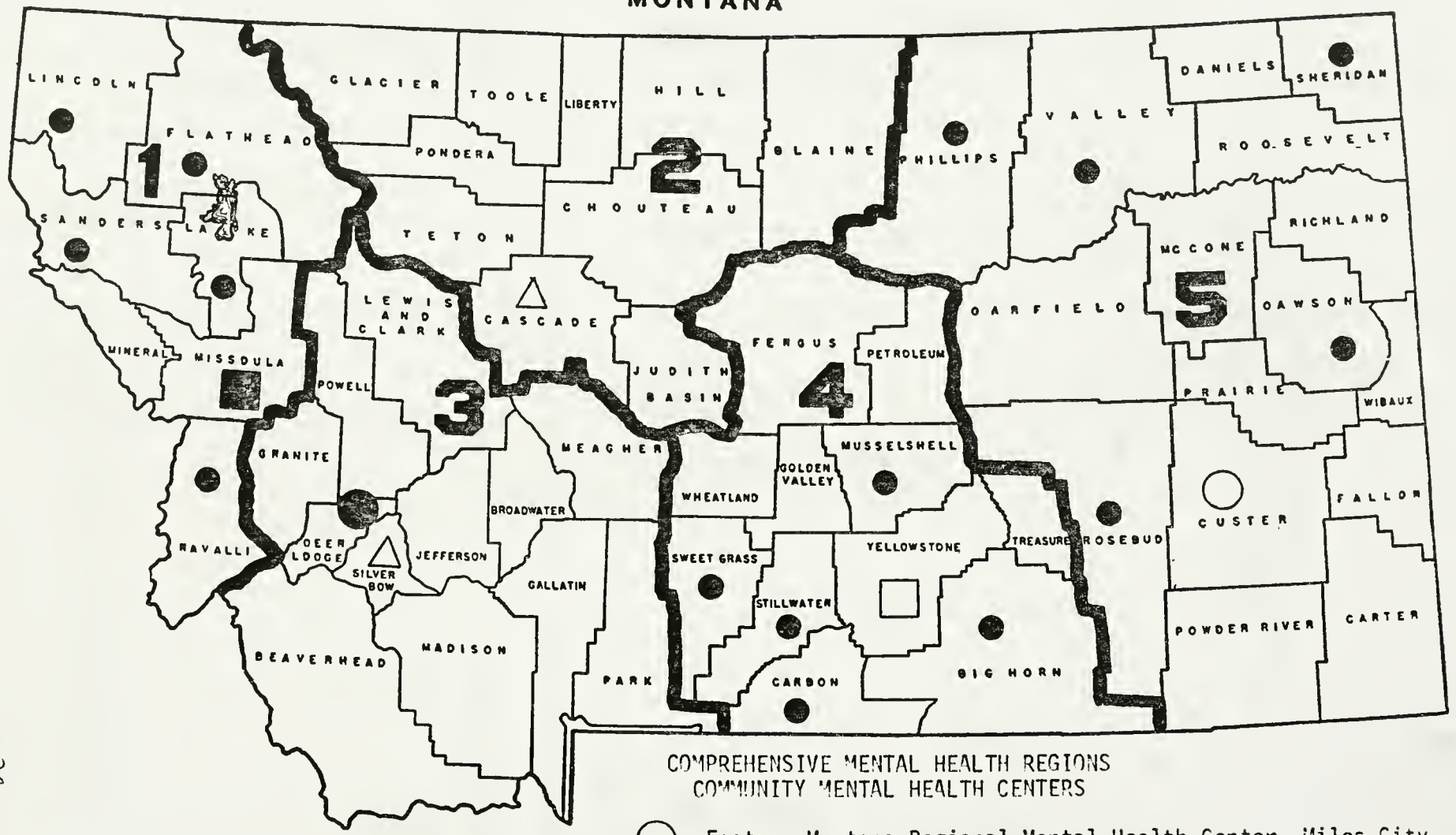
	ADMISSIONS	TOTAL 16TH YEAR	TOTAL OCT. 21, 1957 TO DATE	
MEN	29	29	3832	
WOMEN	4	4	745	
RETURNEES - MEN	8	8	981	
" WOMEN	1	1	167	
TOTAL	42	42	5725	
INDIANS	16	16	887	
3rd TIME ON	2	2	205	
4th TIME ON	0	0	31	
INTERVIEWS	70	70	5851	Since 11/64
CLINIC	68	68	5634	
WALK AWAY	3	3	181	
DISCHARGES	15	15	628	

AVERAGE AGE 39.24

ADMISSION BY TEAMS		A. T. & R. PROGRAM NOVEMBER 1972	TOTAL FROM 1966
CENTRAL	20	16	1201
EASTERN	20	13	840
WESTERN	30	13	1122
TOTAL	70	42	3163

NOTE: Data compiled are on an October to October basis.

MONTANA



COMPREHENSIVE MENTAL HEALTH REGIONS
COMMUNITY MENTAL HEALTH CENTERS

- ○ Eastern Montana Regional Mental Health Center, Miles City
- ■ Western Montana Regional Mental Health Center, Missoula
- □ South Central Montana Regional Mental Health Center, Billings
- ● Warm Springs State Hospital

- ● Satellites
- △ Approved but not funded

1/73

REGIONAL MENTAL HEALTH CENTERS

Eastern Montana Regional Mental Health Center

The Administrative office of the Eastern Montana Regional Mental Health Center currently is located at Miles City, Montana. Satellite offices are located at Forsyth, Glasgow, Glendive, Malta and Plentywood, Montana.

Administrative Office
Executive Building
Miles City, Montana 59301
Rod Newman, Program Director
Phone: 232-1687

Forsyth, Montana 59327
Phone: 356-2606

137 Third Street South
Glasgow, Montana 59230
Phone: 228-9340, 228-9349 (Clinic & Center)

Region V Clinical Office
Glendive Medical Center
Box 715
Glendive, Montana 59330
Phone: 365-2922

Malta, Montana 59538
Phone: 654-2521

Plentywood, Montana 59254
Phone: 765-2550

South Central Montana Regional Mental Health Center

The Administrative Office is located in Billings, Montana. Satellite offices are located at Columbus, Big Timber, Hardin, Red Lodge, and Roundup, Montana.

1245 North 29th Street
Billings, Montana 59101
Bryce Hughett, M.D., Center Director
John Taylor, Administrative-Assistant
Phone: 252-5658 or 252-5659, 8 a.m. to 5 p.m.
252-5650 on call 24 hr.

P. O. Box 891
Stillwater Community Hospital
Columbus, Montana 59019
Phone: 322-5834

Sweet Grass Community Hospital
Big Timber, Montana 59011
Phone: 932-2132

10 West Third
Hardin, Montana 59034
Phone: 665-1049

206 North Broadway
Red Lodge, Montana 59068
Phone: 446-2500

Wall Building - Room 118
Roundup, Montana 59072
Phone: 323-1142

Western Montana Regional Mental Health Center

The Administrative Office is located in Missoula, Montana. Satellite offices are located at Kalispell, Ronan, Libby, Thompson Falls, and Hamilton, Montana.

2829 Fort Missoula Road
Missoula, Montana 59801
G. Clark Anderson, Program Director
Phone: 543-5177

704 South Main Street
Box 546
Kalispell, Montana 59901
Phone: 756-9065

Box 434, Drawer E
Ronan, Montana 59864
Phone: 676-8500

321 Mineral Avenue
Libby, Montana 59923
Phone: 293-6513

P. O. Box 562
Thompson Falls, Montana 59873
Phone: 827-3641

186 South Third Street
Hamilton, Montana 59840
Phone: 363-1051

CATCHMENT AREA I

Counties of:	Flathead
	Lake
	Lincoln
	Mineral
	Missoula
	Ravalli
	Sanders

Total Population	154691
Total Land Area	19717 sq. miles
Population Density	7.8 persons/sq.mile

CATCHMENT AREA I
(7 Counties)

County	Governor's Planning Region	Regional Mental Health Centers & Satellites	Mental Hygiene Clinics	Licensed Hospitals # Beds	Comp Health Planning 314B Agency	Other Resources
Flathead	10	M.H.C. (Satellite) Kalispell		2 -- 134	Dist. 1	AA NW Montana I & R Center Kalispell
Lake	10	M.H.C. (Satellite) Ronan		3 -- 95	Dist. 1	AA Crisis Center & Detox Cent Ronan
Lincoln	10	M.H.C. (Satellite) Libby		1 -- 34	Dist. 1	AA
Mineral	11			1 -- 9	Dist. 1	AA
Missoula	11	Western Montana M.H.C. (Regional) Missoula		4 -- 429	State CHP Dist. Rep.	AA Our House, Half-Way House Missoula
Ravalli	11	M.H.C. (Satellite) Hamilton		1 -- 32	Dist. 1	AA
Sanders	11	M.H.C. (Satellite) Thompson Falls		2 -- 38	Dist. 1	AA Flathead Res. Alch. Progra Dixon
TOTALS				14 -- 771		

CATCHMENT AREA I
(7 Counties)

County	Governor's Planning Region	1970 Pop.	Indian Pop. 1970 Census	Est. 8.5% Alcohol Abusers	Area In Sq. Mi.
Flathead	10	39460	327	3354	5280
Lake	10	14445	2199	1228	1655
Lincoln	10	18063	209	1535	3728
Mineral	11	2958	16	251	1223
Missoula	11	58263	660	4952	2624
Ravalli	11	14409	142	1225	2388
Sanders	11	7093	384	603	2819
TOTALS		154691	3937	13148	19717
7.8 Persons Per Sq. Mi.					

AGENCY - Flathead Reservation Alcoholism Program
Dixon, Montana 59831
Dennis A. Dumont, Alcoholism Counselor/Coordinator
Phone: 644-2374

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
Flathead Tribal Alcoholism Program at Dixon	Funded - OEO FY 70 $30,000 FY 72 $24,999 FY 73 $25,000 (OEO-NIAAA transfer 1/1/73 to 12/31/73)	Counseling Information Referral Half-Way House
Crisis Center and Detox Unit St. Lukes Hospital, Ronan Denese Evant, Supervisor	I.H.S. $28,000 (FY 72)	Detox Unit & Staff St. Lukes Hospital Ronan, Montana

AGENCY - Northwest Montana Alcohol and Drug Information Referral Center
30 Fifth Avenue, West
Kalispell, Montana 59901
Will Walter, Chairman
Phone: 752-1595

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Vocational Rehabilitation Welfare Client payments Local donations - time and money Governor's Crime Control Commission $13,367 10/30/72 to 10/29/73	Information and Referral Service Half-Way House

AGENCY - Our House
650 W. Pine
Missoula, Montana 59801
Myron J. Mason, Director/Counselor
Fred O. Williams, Chairman, Board of Directors
Phone: 728-9922

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY
	FY 1972 - (P.L. 91-616 State Formula Grant In Aid - $40,000 United Givers Fund	Information and Referral Public Information Individual and Group Counseling Residential Treatment Follow-up Half-Way House

AGENCY - Western Montana Council on Alcoholism and Other Drug Dependence, Inc.
503 Toole, Missoula, Montana 59801
Jim Parker, President
Phone: 728-3710

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	OEO United Fund	

CATCHMENT AREA II

Counties of:	Blaine
	Cascade
	Chouteau
	Glacier
	Hill
	Judith Basin
	Liberty
	Pondera
	Teton
	Toole
Total Population	146737
Total Land Area	26103 sq. miles
Population Density	5.6 persons/sq. mile

CATCHMENT AREA II
(10 Counties)

County	Governor's Planning Region	1970 Pop.	Indian Pop. 1970 Census	Est. 8.5% Alcohol Abusers	Area In Sq. Mi.
Blaine	4	6727	1562	572	4279
Cascade	5	81804	1509	6953	2673
Chouteau	5	6473	153	550	3936
Glacier	5	10783	4576	917	3006
Hill	4	17358	1607	1475	2946
Judith Basin	6	2667	7	227	1880
Liberty	4	2359	9	200	1459
Pondera	5	6611	546	562	1654
Teton	5	6116	45	520	2310
Toole	5	5839	63	496	1965
TOTALS		146737	10077	12472	26108
5.6 Persons per Sq. Mi.					

CATCHMENT AREA II
(10 Counties)

County	Governor's Planning Regions	Regional Mental Health Centers & Satellites	Mental Hygiene Clinics	Licensed Hospitals # Beds	Comp Health Planning 314B Agency	Other Resources
Blaine	4			I.H.S. Indian-- Harlem 22	Dist. 2	AA Fort Belknap Reservation Alcohol Program, Harlem
Cascade	5		Gt. Falls M.H.C. 1130 17th Ave. So. Gt. Falls 59401	3 -- 509	State CHP Dist. 2 Rep.	AA Providence Resocialization Center -- Great Falls
Chouteau	5			2 -- 28	Dist. 2	AA--Providence Ranch
Glacier	5			I.H.S. 34 Browning 1 -- 44	Dist. 2	AA--Blackfeet Reservation Alcohol Program Browning
Hill	4			1 -- 148	Dist. 2	AA--No. Mont. Council, Hav Rocky Boy Reservation Program -- Box Elder
Judith Basin	6				Dist. 2	
Liberty	4			1 -- 11	Dist. 2	AA
Pondera	5			1 -- 50	Dist. 2	AA
Teton	5			1 -- 22	Dist. 2	AA
Toole	5			1 -- 30	Dist. 2	AA
TOTALS				11 -- 842 Indian 2 -- 56		

AGENCY - Blackfeet Reservation Alcoholism Program
Box 62
Browning, Montana 59417
Leo Kennerly, Program Director
Phone: 338-7178

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Funded - OEO FY 1970 - $85,489 1971 - 35,439 1972 - 38,446 OEO - NIAAA Transfer not approved as of 1/17/73	Counseling Information Referral

AGENCY - North Central Alcoholism Services, Inc.
929 4th Avenue, North
Great Falls, Montana 59401
Phone: 727-2512
Tom Dimopoulos, President - Havre

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
		Association of Alcoholism Programs Catchment Area II

AGENCY - Cascade Council on Alcoholism
Judge William Coder, Chairman of the Board
920 4th Avenue North
Great Falls, Montana 59401
Phone: 452-7465

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY
Providence Resocialization Center 920 4th Avenue North Great Falls, Montana 59401 Paul Davis, Jr., Director Phone: 452-7465 Providence Ranch Carter, Montana 59420	Governor's Crime Control Commission $32,387.00 - September 1, 1971 to July 31, 1972 Private funds Cascade Council on Alcoholism Vocational Rehabilitation Governor's Crime Control Commission $21,383.00 - September 1, 1972 to March 31, 1973	Residential treatment, counseling, men, and ex-felons

AGENCY - Fort Belknap Reservation Alcoholism Program
Harlem, Montana 59526
Stephen Fox, Director
Phone: 353-2731

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Funded - OEO FY 1971 - $37,380 1972 - 40,376 OEO - NIAAA transfer $44,964 11/1/72 to 10/31/73	Counseling Information Referral Half-Way House Detox at I.H. Hospital

AGENCY - Northern Montana Council on Alcohol and Other Dependent Drugs, Inc.
Recovery Center
1020 Assiniboine
Havre, Montana 59501
Herbert Bauer, Director
Phone: 265-9665

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Hill County - OEO FY 1970 - $52,712 1971 - 52,712 1972 - 13,178 25,929 (P.L. 91-616 State Formula Grant) Emergency Employment Act District Court Budget - $8,000 Vocational Rehabilitation OEO - NIAAA Transfer $44,000 December 1, 1972 to November 30, 1973	

AGENCY - Rocky Boy Reservation Alcoholism Program
Rocky Boy Route, Box Elder, Montana 59521
Henry Sutherland, Alcoholism Counselor
Phone: 395-2596

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Funded - OEO FY 71 $25,340 FY 72 9,198 OEO - NIAAA transfer $25,000 1/1/73 to 12/31/73	Counseling Information Referral

CATCHMENT AREA III

Counties of:	Beaverhead
	Broadwater
	Deer Lodge
	Gallatin
	Granite
	Jefferson
	Lewis & Clark
	Madison
	Meagher
	Park
	Powell
	Silver Bow

Total Population	167100
Total Land Area	28576 sq.miles
Population Density	5.8 persons/sq.mile

CATCHMENT AREA III
(12 Counties)

County	Governor's Planning Region	1970 Pop.	Indian Pop. 1970 Census	Est. 8.5% Alcohol Abusers	Area In Sq. Mi.
Beaverhead	12	8187	31	696	5580
Broadwater	8	2526	22	215	1245
Deer Lodge	12	15652	240	1330	741
Gallatin	9	32505	99	2763	2540
Granite	12	2737	20	233	1737
Jefferson	8	5238	64	445	1654
Lewis & Clark	8	33281	486	2829	3513
Madison	12	5014	78	426	3541
Meagher	9	2122	12	180	2356
Park	9	11197	32	952	2613
Powell	12	6660	98	566	2340
Silver Bow	12	41981	359	3568	716
TOTALS		167100	1541	14203	28576
5.8 Persons Per Sq. Mi.					

CATCHMENT AREA III
(12 Counties)

County	Governor's Planning Region	Regional Mental Health Centers & Satellites	Mental Hygiene Clinics	Licensed Hospitals # Beds	Comp Health Planning 314B Agency	Other Resources
Beaverhead	12			1--- 31	Dist. 4	AA--Frontier Half-Way House Dillon
Broadwater	8			1--- 23	314B Helena Dist. 4	
Deer Lodge	12			4---1687	Dist. 4	AA--Warm Springs State Hosp Alcoholism Services Ctr Galen
Gallatin	9			2--- 174	Dist. 4	AA
Granite	12			1--- 10	Dist. 4	
Jefferson	8			1--- 60	314B Helena Dist. 4	AA
Lewis & Clark			Helena M.H.C. 1417 Helena Ave. Helena 59601	3--- 235 VA Center 160	314B Agency SW Mont. Dist. 4	AA--New Horizon Half-Way, Helena--New Horizon Treatment Center, Helen Indian Alliance
Madison	12			2--- 29	Dist. 4	AA
Meagher	9			1--- 8	314B Helena Dist. 4	
Park	9			1--- 58	314B Helena Dist. 4	AA
Powell	12			2--- 44	Dist. 4	AA
Silver Bow	12		Butte M.H.C. 225 So. Idaho Butte 59701	2--- 322	Dist. 4	AA--New Directions Half-Way Butte--Alpha Center, Butte No. Am. Indian Alliance, Bu
TOTALS				VA--- 160 21---2681		

AGENCY - Community Health Services for Alcoholism
225 So. Idaho
Butte, Montana 59701
James Forsell, Executive Director
Paul Everatt, President

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY
Alpha Center St. James Community Hospital 400 So. Clark Street Butte, Montana 59701	Private St. James Hospital	Counseling Aftercare Information and Referral
New Directions Half-Way House 225 So. Idaho (Old) St. James Hospital Butte, Montana 59701 Sid Broussard, House Manager Phone: 723-9003	Vocational Rehabilitation Model Cities: 7/1/72 - 6/30/73 $20,252 7/1/73 - 6/30/74 $15,000	

AGENCY - North American Indian Alliance
72 East Park
Butte, Montana 59701
Michelle Robinson, Director
Phone: 723-2009

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY
	FY 1972 - $20,204 (P.L. 91-616 State Formula Grant In Aid) Application to NIAAA for $85,316 (3 years) Pending Approval	Information and referral Outreach and Counseling

AGENCY - Frontier Half-Way House
1100 Atlantic, Dillon, Montana 59725
Mrs. Lilly Weinrich, Director
Phone: 683-4305

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Private funds Client payments County Local charity Governor's Crime Control Commission $5,400.00 11/1/72 to 10/31/73	Short term aftercare- Residential counseling- Public information Half-Way House

AGENCY - Helena Indian Alliance
Larry Trotchie, Director
P. O. Box 1196
Helena, Montana 59601
Phone: 442-9334

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	FY 1972 - $7,852.00 (P.L. 91-616 State Formula Grant in Aid)	Information and referral and community outreach

AGENCY - Alcoholism and Drug Association of Southwestern Montana
216 North Ewing
Helena, Montana 59601
Phone: 442-8831
Harry Sing, Acting Coordinator

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
Alcoholism Information and Referral Center 216 North Ewing Helena, Montana 59601 Phone: 442-8831	Health Services Mental Health Administration (HSMHA) $54,000 terminates 8/31/72 Model Cities $24,000 ('71 - '72)	Information and Referral - Public Information - Education
New Horizons Aftercare Center 229 East Sixth Street Helena, Montana 59601 Phone: 442-8831	Vocational Rehabilitation $10,000 to $15,000 per year Patient payments - $4,000 to $6,000 per year	Half-Way House, Counseling Detoxification in affiliated hospital
New Horizons Treatment Center 1101 Missoula Avenue Helena, Montana 59601 Bob Sallgren, Director Phone: 442-0790	NIMH Grant for eight years with $124,938 Grant Award 4/1/72	In-patient treatment facility Twenty-one day treatment program
Alcoholism Information and Referral Center 109 East Main Bozeman, Montana 59715 Mrs. Joy Nash, Counselor-Director Phone: 586-2090	P.L. 91-616 Grant-In-Aid $13,300 (State Formula Grant)	Information and Referral Center of Bozeman, Outreach Program

CATCHMENT AREA IV

Counties:	Big Horn
	Carbon
	Fergus
	Golden Valley
	Musselshell
	Petroleum
	Stillwater
	Sweet Grass
	Treasure
	Wheatland
	Yellowstone
Total Population	133665
Total Land Area	24859 sq. miles
Population Density	5.4 persons/sq.mile

CATCHMENT AREA IV (11 Counties)	County	Governor's Planning Region	1970 Pop.	Indian Pop. 1970 Census	Est. 8.5% Alcohol Abusers	Area In Sq. Mi.
	Big Horn	7	10057	3917	854	5055
	Carbon	7	7080	29	602	2074
	Fergus	6	12611	65	1072	4253
	Golden Valley	6	931	1	79	1180
	Musselshell	6	3734	2	317	1887
	Petroleum	6	675	2	57	1672
	Stillwater	7	4632	23	394	1801
	Sweet Grass	7	2980	2	253	1849
	Treasure	3	1069	1	91	997
	Wheatland	6	2529	17	215	1425
	Yellowstone	6	87367	1063	7426	2666
	TOTALS		133665	5122	11360	24859
	5.4 Persons Per Sq. Mi.					

(11 Counties)

County	Governor's Planning Region	Regional Mental Health Centers & Satellites	Mental Hygiene Clinics	Licensed Hospitals # Beds	Comp Health Planning 314B Agency	Other Resources
Big Horn	7	M.H.C. (Satellite) 10 West Third Hardin, Mont.		I.H.S. Indian Hosp Crow Agency 34 1 -- 18	Dist. 5	AA--Crow Reservation Alcohol Program Crow Agency, Montana
Carbon	7	M.H.C. (Satellite) 206 No. Broadway Red Lodge, Mont.		1 -- 28	Dist. 5	AA
Fergus	6			1 -- 51	Dist. 2	AA
Golden Valley	6				Dist. 5	
Musselshell	6	M.H.C. (Satellite) Roundup, Mont.		1 -- 17	Dist. 5	
Petroleum	6				Dist. 2	
Stillwater	7	M.H.C. (Satellite) Columbus, Mont.		1 -- 27	Dist. 5	AA
Sweet Grass	7	M.H.C. (Satellite) Big Timber, Mont.		1 -- 17	Dist. 5	AA
Treasure	3				Dist. 5	AA
Wheatland	6			1 -- 25	Dist. 5	
Yellowstone	6	South Central M.H.C. (Regional) Billings, Mont.		2 -- 393	314B Under Comp Health Dist. 5 Rep.	AA--Big Sky Half-Way House Billings -- Rimrock Foundation -- Billings
TOTALS				Indian 1 -- 34 9 -- 576		

AGENCY - Yellowstone Council on Alcoholism, Inc.
P. O. Box 645
Billings, Montana 59103
Monte Fahnlander, Board of Directors

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
Big Sky Half-Way House 332 Grand Avenue P. O. Box 645 Billings, Montana 59103 John Lee, Director Phone: 259-0940	Governor's Crime Control Commission $11,375.00 - September 1, 1971 to July 31, 1972 Vocational Rehabilitation Client payments Private donations Governor's Crime Control Commission $13,140.00 - October 30, 1972 to October 29, 1973	Aftercare, including parolees counseling Half-Way House Group Therapy Open AA Meetings Referral Service

AGENCY - Rimrock Foundation
Suite 201
804 North 29th Street
Billings, Montana 59101
Phone: 252-2542
Elynore O'Brien, Director

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY
	Private, Family Funds FY 1972 - (P.L. 91-616 Grant In Aid all from State Formula Grant) training $ 1,353.50 staffing 13,430.00 survey 13,922.00 I & D Application to NIAAA June 1, 1972 $50,000 requested (Approved, but not funded as of 1/17/73)	Out-patient counseling Referral Public Information Individual Counseling Group Therapy Employment Counseling Marriage Counseling

AGENCY - Crow Reservation Alcoholism Program
Crow Agency, Montana 59022
Phone: 638-2254

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Funded - OEO FY 71 $35,000 FY 72 21,796 OEO - NIAAA transfer not approved as of 1/17/73	Counseling Information Referral

AGENCY - Northern Cheyenne Reservation Alcoholism Program
P. O. Box 173, Lame Deer, Montana 59043
Sylvester Knows Gun, Sr., Alcoholism Counselor
Phone: 477-6377

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
Alcoholism Center	Funded - OEO FY 71 $29,665 FY 72 33,000 OEO - NIAAA transfer $56,409 12/1/72 to 11/30/73	Counseling Information Referral Half-Way House

AGENCY - Montana Indian Commission on Alcohol and Drug
P. O. Box 173, Lame Deer, Montana 59043
Sylvester Knows Gun, Sr., Chairman
Phone: 477-6377

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
		Compilation of data, identifying the needs, priorities, and current status of programs concerning Indian alcoholism and drug abuse within the State; Assistance to Indian communities for the planning, development, and funding of Indian alcoholism and drug abuse programs on the local levels.

CATCHMENT AREA V

Counties of:

- Carter
- Custer
- Daniels
- Dawson
- Fallon
- Garfield
- McCone
- Phillips
- Powder River
- Prairie
- Richland
- Roosevelt
- Rosebud
- Sheridan
- Valley
- Wibaux

Total Population	92152
Total Land Area	47591 sq. miles
Population Density	1.9 persons/sq. mile

CATCHMENT AREA V
(16 Counties)

County	Governor's Planning Region	1970 Pop.	Indian Pop. 1970 Census	Est. 8.5% Alcohol Abusers	Area In Sq. Mi.
Carter	3	1956	3	166	3313
Custer	3	12174	65	1035	3775
Daniels	1	3083	16	262	1443
Dawson	2	11269	50	958	2380
Fallon	3	4050	13	344	1633
Garfield	2	1796	--	153	4812
McCone	2	2875	17	244	2652
Phillips	1	5386	258	458	5287
Powder River	3	2862	34	243	3298
Prairie	2	1752	13	149	1739
Richland	2	9837	40	836	2103
Roosevelt	1	10365	3119	881	2399
Rosebud	3	6032	1820	513	5042
Sheridan	1	5779	42	491	1720
Valley	1	11471	972	975	5104
Wibaux	2	1465	--	125	891
TOTALS		92152	6453	7833	47591
1.9 Persons Per Sq. Mi.					
STATE TOTALS		694345	27130	59016	146851

CATCHMENT AREA V
(16 Counties)

County	Governor's Planning Region	Regional Mental Health Centers & Satellites	Mental Hygiene Clinics	Licensed Hospitals # Beds	Comp Health Planning 314B Agency	Other Resources
Carter	3			1 -- 16	Dist. 3	AA
Custer	3	Eastern Region M.H.C. Miles City		1 --138 VA Hosp 96	Dist. 3	AA--Miles City Half-Way, Action for Eastern Mont
Daniels	1			1 -- 20	Dist. 3	AA
Dawson	2	M.H.C. (Satellite) Glendive, Mont.		1 -- 46	Dist. 3	AA--Action for Eastern Mont Glendive, Montana
Fallon	3			1 -- 29	Dist. 3	AA
Garfield	2				Dist. 3	
McCone	2			1 -- 20	Dist. 3	
Phillips	1	M.H.C. (Satellite) Malta, Mont.		1 -- 30	Dist. 3	AA
Powder River	3				Dist. 3	AA
Prairie	2			1 -- 10	Dist. 3	
Richland	2			1 -- 55	Dist. 3	AA
Roosevelt	1			3 -- 91	Dist. 3	AA--Action for Eastern Mont Wolf Point, Montana Fort Peck Res. Alch. Pg Poplar, Montana
Rosebud	3	M.H.C. (Satellite) Forsyth, Mont.		1 -- 20	Dist. 3	AA--Northern Cheyenne Res. Alch. Program, Lame Dee
Sheridan	1	M.H.C. (Satellite) Plentywood, Mont.		1 -- 32	Dist. 3	AA
Valley	1	M.H.C. (Satellite) Glasgow, Mont.		1 -- 63	Dist. 3	AA--Fort Peck Res. Alcohol Program, Glasgow, Mont.
Wibaux	2				Dist. 3	
TOTALS				VA 1 - 96 15 -575		

AGENCY - Hi-Line Help Center, Inc.
Glasgow, Montana 59230
c/o Ed Freh, Glasgow Mental Health Clinic

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Local money	No program at this time

AGENCY - Action for Eastern Montana Community Action Program
Earl Hubley, Executive Director
Alcohol and Drug Dependence Program, Phil Sullivan, Director
Box 381
Glendive, Montana 59330
Phone: 365-4100

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY
Dilworth and Ames Glendive, Montana 59330 Box 889 Glasgow, Montana 59230 Herb Sukut, Counselor Alta Trailer Park Miles City, Montana 59301 Don Anderson, Counselor Phone: 232-2262 Wolf Point, Montana 59201 Dennis Latka, Counselor Phone: 653-1820	OEO - $21,750 FY '72 87,000 FY '70 FY 1972 - (P.L. 91-616 Grants In Aid from State Formula) staffing $18,500 training 3,226 OEO - NIAAA transfer $71,775 December 1, 1972 to November 30, 1973	Operates one Half-Way House Counseling Public Information Proposes three new Half-Way Houses Technical Assistance Program Consultation

AGENCY - Miles City Half-Way House
115 North Second
Miles City, Montana 59301
Arnold Mickelson, Manager
Phone: 232-9830

Board of Directors President Rev. Gerald Ebelt
Phone: 232-2150

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY
	Governor's Crime Control Commission $9,960.00 - October 1, 1971 to October 1, 1972	Half-Way House Aftercare Counseling
	Governor's Crime Control Commission $14,970 - October 30, 1972 to October 29, 1973	

AGENCY - Fort Peck Reservation Alcoholism Program
Box 1027, Poplar, Montana 59255
Jack Pine, Alcoholism Counselor
Phone: 768-3852

COMPONENTS	SOURCES OF FUNDS	PROGRAM ACTIVITY
	Funded - OEO FY 70 $14,600 FY 72 30,203 I.H.S. $10,000 OEO - NIAAA transfer $33,223 10/1/72 to 9/30/73	Counseling Information Referral Half-Way House Thrift Shop

AGENCY - Eastern Montana Council on Alcoholism
Clifford I. Hanson, Chairman of the Board
Scobey, Montana
Phone: 487-2791 (office - Assessor, Daniels County)
487-2636 (home)

COMPONENTS	SOURCE OF FUNDS	PROGRAM ACTIVITY

ALLOCATION OF FY'72 91-616 GRANTS-IN-AID

Action for Eastern Montana	$ 13,460.00
"Our House", Missoula	40,000.00
Alcohol & Drug Association of Southwestern Montana	13,300.00
Dawson College	3,226.50
Helena Indian Alliance	7,852.00
Rimrock Guidance Foundation	1,535.50
Rimrock Guidance Foundation	13,430.00
Rimrock Guidance Foundation	13,922.00
Butte Indian Alliance	20,204.00
Northern Montana Council on Alcohol and Other Dependent Drugs	25,929.00
TOTAL	$157,859.00

Department of Health and Environmental Sciences
STATE OF MONTANA HELENA, MONTANA 59601

John S. Anderson M.D.
DIRECTOR

June 6, 1973

Abel Garcia Ossorio, Ph.D.
Regional Health Director for Mental Health
Region VIII, DHEW
Federal Office Building
19th and Stout Streets
Denver, Colorado 80202

Dear Doctor Ossorio:

The attached materials are in response to the April 2, 1973 letter from Mr. Theodore Fasso, Acting Associate Regional Health Director for Mental Health, concerning the review of the 1973 Montana State Plan for Alcoholism Prevention, Treatment and Rehabilitation. Several of these points were also discussed during conferences with he and Mr. Richardson, both here in Helena and by telephone. Much of this supplementary material has been discussed during its development with members of the advisory council, with representatives of Indian and other alcoholism programs in the State and various personnel within State government.

We have considered the comments concerning the 1973 plan made by numerous citizens and various groups in our State. These comments have been made verbally to the advisory council, and in writing to the Governor, this Department, and your office. We have attempted to incorporate the suggestions into the material being submitted for your review.

We trust this response is in order and will permit us to receive the fiscal year 1973 state formula monies for Alcoholism and Alcohol Abuse Prevention, Treatment and Rehabilitation, rather than having them lapse.

Sincerely yours,

John S. Anderson

John S. Anderson, M.D.
Director

LOCAL INPUT INTO REVIEW & PRIORITIES

Chapter 303 of the session laws 1969, (Title 69, Chapter 62 R.C.M. 1947) entitled "Act to Establish the Montana Commission on Alcohol and Drug Dependence within the Department of Health" stated the following as the purpose and intent of the Act and the policy of the state. "It is the purpose of this act and the policy of this state to recognize alcohol and drug dependence as problems affecting the health, safety, morals, economy, and general welfare of this state; to recognize alcohol and drug dependence as problems subject to treatment; and to recognize the sufferer of alcohol, drug dependence, or both, as worthy of treatment and rehabilitation. It is the intent of this act to establish means whereby the appropriate resources of this state may be focused fully and effectively upon the problems of alcohol and drug dependence and utilized in implementing programs for the control and treatment of these problems."

It will be the policy and the intent of this Department to maximize the availability of services and treatment facilities for alcohol and alcohol abuse at the local level. This is recognizing that alcoholism as a disease should involve treatment at the local level so that not only the patient but his whole family can be involved in the treatment and follow-up procedures.

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Consequently it will be the policy of this Department to encourage the development of comprehensive services for alcohol abusers at the local level. The type and extent of this treatment and programming can best be determined locally and should involve those persons not only directly involved with the treatment and prevention of alcoholism, but those also involved with the planning and delivery of health services in general.

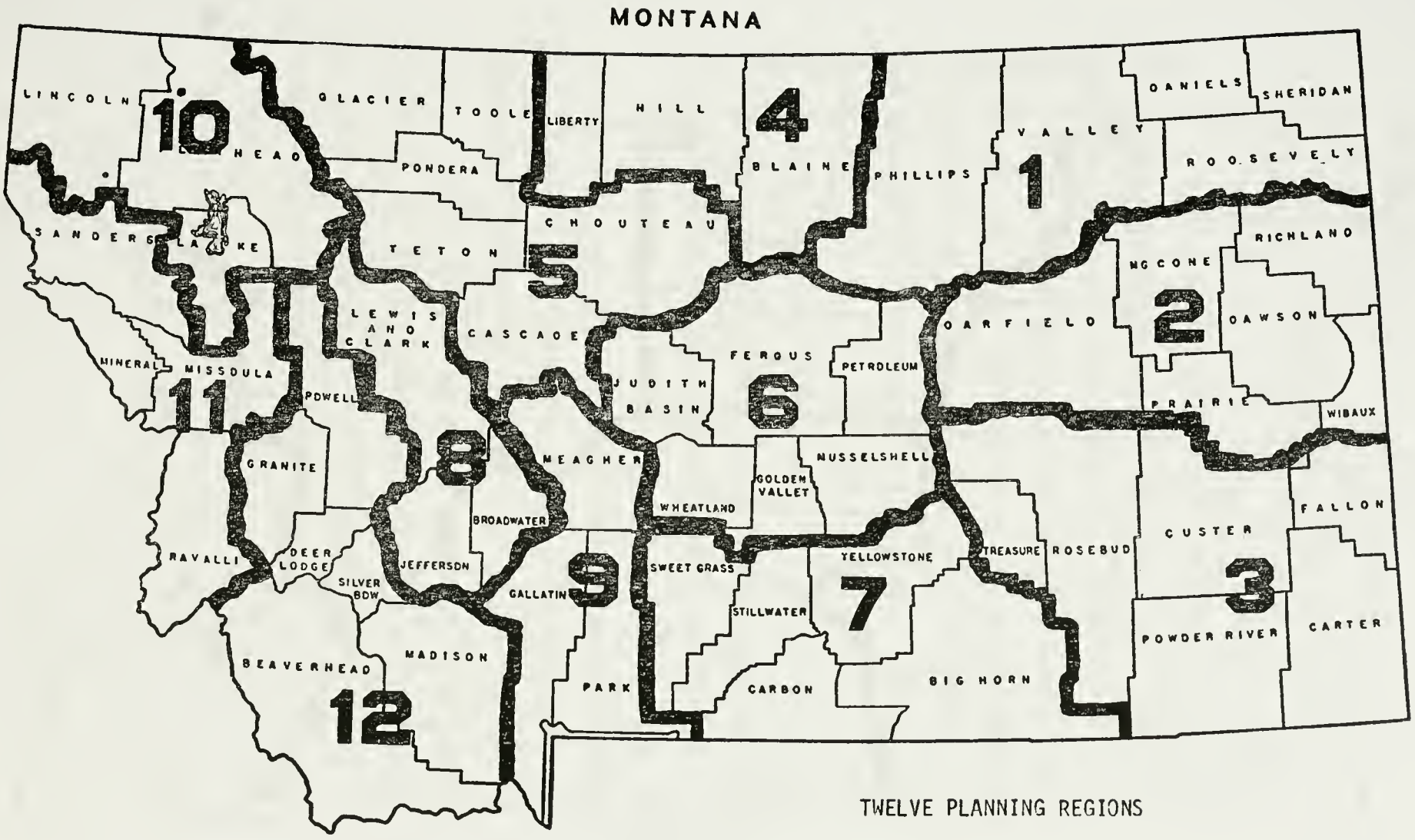
This Department will look strongly to the Regional Comprehensive Health Planning Councils and the development of sound, reasonable, alcoholism plans for prevention, treatment and rehabilitation, emphasizing the maximum utilization of local resources for all aspects of treatment. It will also look toward Comprehensive Health Planning for help in determining those instances where there are duplication of service, over or under utilization of services. We will also rely upon Comprehensive Health Planning and the local health planning organizations to assist us in determining areas of need for development of services.

We will be looking toward the development of a long-range plan, rather than a short term schedule for the dispersement of formula grant monies. We would anticipate that the 1974 Fiscal Year Plan for Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation will be a long-range plan and will be looking toward the maximum utilization and development of

alcoholism services at the local and regional level. This plan will be developed from the efforts of local health planning councils, alcoholism planning councils, alcoholism programs and persons interested in the prevention and treatment of alcohol abuse in the communities. It will be targeted for completion at approximately the first of October, 1973 and will be submitted to the Regional Office of HEW in Denver for their review at that time. The full local review and comment procedure will be followed as required both by federal regulations and by rules and regulations established here in the state. Every effort will be made to maximize local input into the development of the State Plan, which will be those plans from the 5 Comprehensive Health Planning Regions, and the plan developed by the Montana Indian Commission on Alcohol and Drug Abuse for Indian alcoholism programming in the state.

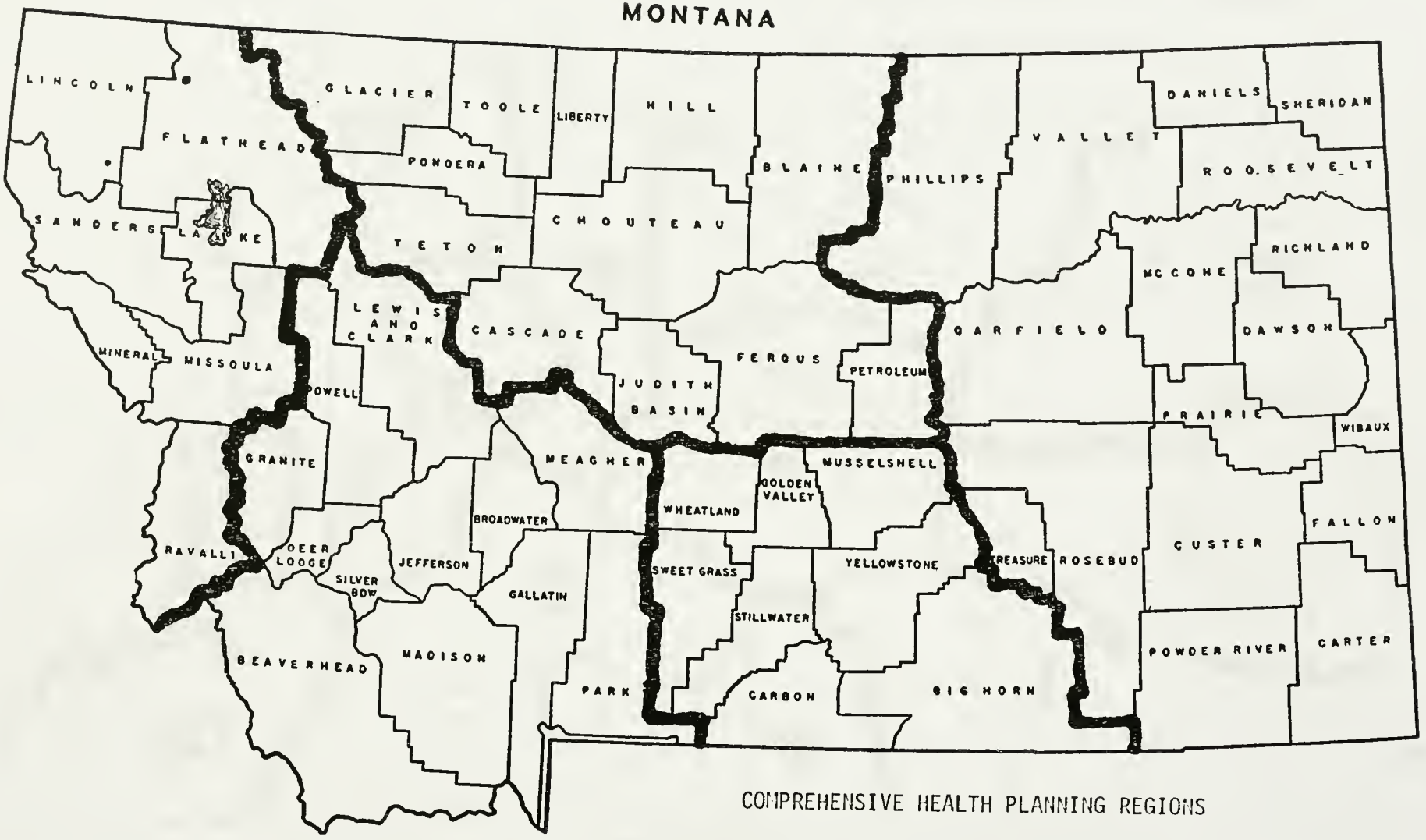
If and when federal agencies again are accepting applications for various types of alcoholism grant programs, review, comment, and sign-off by the local Comprehensive Health Planning agency will be required. A review and comment system will be devised, requiring the applicant to submit his proposal to local planning and co-ordinating agencies before submitting to the State Alcohol Authority and State A-95 Clearinghouse. This will also provide time for such applications to be properly reviewed by advisory council sub-committees to be convened for the purpose of review and comment upon the application.

This will provide for other agencies and planning groups to have an opportunity to review, comment, and provide their input into the submission of such proposals for funding.



TWELVE PLANNING REGIONS

as Designated by Governor Forrest H. Anderson
Executive Order 2-71
August 24, 1971



COMPREHENSIVE HEALTH PLANNING REGIONS

REVIEW AND/OR APPEAL

The P.L. 91-616 grant-in-aid funds will be made available in equal amounts to the five 314(B) agencies and to the Montana Indian Commission on Alcohol and Drugs.

These agencies may elect to sub-grant funds and if this is done the 314(B) planning council will act as a review board for all applications from its region. The Montana Indian Commission will review Indian applications for sub-grant funds.

The executive director and/or chairman of the Board of each applicant program will have an opportunity to personally defend his application before the appropriate review group.

In case of an appeal, an applicant may request, in writing, a hearing from the State Alcoholism Advisory Council and may then request, in writing, a hearing from the Executive Director of the Department of Health.

Applications to NIAAA will be reviewed by the 314(B) council or the Montana Indian Commission, as applicable to the situation, and the comments will be forwarded to the State Department of Health and Environmental Sciences.

PROGRAM OBJECTIVES

1. Reduce the impact of alcohol abuse and alcoholism.

2. Encourage local development of community based programs of prevention, treatment, and rehabilitation.

3. Upgrade alcoholism programs and facilities to meet growing needs.

4. Develop a data collection system which will make adequate evaluation possible.

5. Develop an increased awareness of the problems of alcohol abuse and alcoholism.

ADVISORY COUNCIL

Target date for re-organization and re-constitution of the Advisory Council for Alcohol & Drug Dependence--and/or the Montana Advisory Council for Alcoholism & Alcohol Abuse, will be November 30, 1973. This is the date on which the present Advisory Council term of office will be terminated. This provides a logical target date and will provide us with the opportunity to completely re-constitute and re-appoint an Advisory Council.

We have appended sections of the Montana Re-organization Act of 1971, showing those sections having to do with advisory councils. Although there are statutory limitations on the length of service of an advisory council and the term of office of its members, there is no restriction on the possibility of the person being re-appointed to the advisory council, thereby providing a means of continuity for the advisory council.

A number of comments have been received from throughout the state concerning the makeup of the advisory council. One of the recommendations that has been made by the Montana Indian Commission on Alcohol & Drug Abuse is that at least 3 persons of American Indian ethnicity be appointed to the advisory council. This is an acceptable recommendation.

A number of strategies should be brought about in re-constituting the advisory council. The proposed re-organization is along the basis of Comprehensive Health Planning Districts, with 2 persons being appointed from each, and the 5 persons at large. At least three of these persons will be of American Indian ethnicity. Nominations to the State Advisory Council will be made to the Director of the Department by persons residing in each of the five regions and for representatives of each region. Nominations of Indian members of the Advisory Council will be solicited from the Montana Indian Commission on Alcohol & Drug Abuse, for consideration by the Director, with the concurrence of the Governor.

As previously requested by NIAAA, a number of ex-officio appointments will also be made. These will include representation from the following agencies as specified by NIAAA--the Veterans Administration and the Indian Health Service. Other possible ex-officio appointments would be from various state agencies that have a concern with alcoholism and alcohol abuse, such as the State Mental Health Authority, the State Department of Social and Rehabilitative Services, and the State Department of Justice.

In constituting the advisory council it is by no

means implied that because a person is an employee of a particular agency or organization that he is not eligible for membership on the advisory council. The persons to be selected for appointment to the advisory council may be from any and all walks of life throughout the State of Montana. They should be interested in the field of alcohol abuse and alcoholism and should be widely representative of population groups to be served, governmental employee groups, local citizens groups, local and regional alcoholism programs, as well as representatives of the major socio-economic and ethnic groups found in the State of Montana.

Although there are certain limitations and restrictions imposed by the state statutes upon the advisory council, it will be the policy of the Department that the advisory council will have a strong role in the development and review of the State Plan for Alcohol Abuse, and will have major input into the policies and the operations of the Department's activities in the field of alcoholism.

82A-102. **Declaration of policy and purpose.** (1) The purpose of this act is to comply with the constitutional amendment, chapter 1 of the extraordinary session, Laws of Montana, 1969, adopted at the general election of November 3, 1970, and effective under the governor's proclamation, November 20, 1970, which requires that "[a]ll executive and administrative offices, boards, commissions, agencies and instrumentalities of the executive department of state government and their respective functions, powers, and duties, except for the office of governor, lieutenant governor, secretary of the state, attorney general, state treasurer, state auditor, and superintendent of public instruction, shall be allocated by law among and within not more than twenty (20) departments by no later than July 1, 1973."

(2) It is the public policy of this state and the purpose of this act to create a structure of the executive department of state government which is responsive to the needs of the people of this state and sufficiently flexible to meet changing conditions; to strengthen the executive capacity to administer effectively and efficiently at all levels; to encourage greater public participation in state government; to effect the grouping of state agencies into a reasonable number of departments primarily according to function; to provide that the responsibility within the executive department of state government for the implementation of programs and policies is clearly fixed and ascertainable; and to eliminate overlapping and duplication of effort within the executive department of state government.

(3) It is the intent of the legislative assembly to provide, within this act, with the least disruption of governmental service and functions and the least expense, for the orderly transfer of functions of existing agencies to departments created by this act.

(4) It is further the intent of the legislative assembly not to increase, decrease, or change the statutory functions, powers, and duties of any agency existing before the effective date of this act, unless such intent is specifically expressed herein.

History: En. 82A-102 by Sec. 1, Ch. 272, L. 1971.

82A-103. **Definitions.** As used in this act: (1) "Executive department" means the executive department of state government referred to in the Montana constitution, articles IV and VII.

(2) "Reorganization amendment" means the amendment to the Montana constitution, chapter 1 of the extraordinary session, Laws of Montana, 1969, adopted at the general election of November 3, 1970, and effective under the governor's proclamation, November 20, 1970.

(3) "Agency" means an office, position, commission, committee, board, department, council, division, bureau, section, or any other entity or instrumentality of the executive department of state government.

(4) "Unit" means an internal subdivision of an agency, created by law or by administrative action, including a division, bureau, section, or department, and an agency allocated or transferred to a department for administrative purposes only by this act.

(5) Except when used in connection with the name of an agency existing before the effective date of the applicable chapter of this act, "department" means a principal functional and administrative entity, created by this act, within the executive department of state government; is one of the twenty (20) principal departments permitted under the reorganization amendment; and includes its units.

(6) "Department head" means a director, commission, board, commissioner, or constitutional officer in charge of a department created by this act.

(7) "Director" means a department head specifically referred to as a director in this act, and does not mean a commission, board, commissioner, or constitutional officer.

(8) "Advisory capacity" means furnishing advice, gathering information, making recommendations, and performing such other activities as may be necessary to comply with federal funding requirements, and does not mean administering a program or function or setting policy.

(9) "Function" means a duty, power, or program, exercised by or assigned to an agency, whether or not specifically provided for by law.

(10) "Quasi-judicial function" means an adjudicatory function exercised by an agency, involving the exercise of judgment and discretion in making determinations in controversies. The term includes, but is not limited to, the functions of interpreting, applying, and enforcing existing rules and laws; granting or denying privileges, rights, or benefits; issuing, suspending, or revoking licenses, permits, and certificates; determining rights and interests of adverse parties; evaluating and passing on facts; awarding compensation; fixing prices; ordering action or abatement of action; adopting procedural rules; holding hearings; and any other act necessary to the performance of a quasi-judicial function.

(11) "Quasi-legislative function" generally means making or having the power to make rules or set rates and all other acts connected with or essential to the proper exercise of a quasi-legislative function.

(12) "Investment function" means the function of placing public money where it will yield an income or revenue, and includes the functions of:

(a) Assisting agencies with public money to determine if, when, and how much surplus cash is available for investment.

(b) Determining the amount of surplus treasury cash to be invested.

(c) Determining the type of investment to be made.

(d) Preparing the claim to pay for the investment.

82A-11(Creation of advisory councils. (1) A department head or the governor may create advisory councils. An official of the executive department of state government other than a department head or the governor, including the superintendents of the state's institutions and the presidents of the units of the state's university system, or an agency, may also create advisory councils, but only if federal law or regulation requires that such official or agency create the advisory council as a condition to the receipt of federal funds.

(2) Each advisory council created under this section shall be known as the "———————— advisory council."

(3) The creating authority shall prescribe the composition and advisory functions of each advisory council created; appoint its members, who shall serve at the pleasure of the governor; and specify a date when the existence of each advisory council ends.

(4) Advisory councils may be created only for the purpose of acting in an advisory capacity as defined in section 82A-103(8) of this act.

(5) Each member of an advisory council may, unless he is a full-time salaried officer or employee of this state, be paid in an amount to be determined by the department head, not to exceed twenty-five dollars ($25) for each day in which he is actually and necessarily engaged in the performance of council duties, and shall also be reimbursed for actual and necessary expenses incurred while in the performance of council duties. Members who are full-time salaried officers or employees of this state may not be compensated for their service as members, but shall be reimbursed for their expenses.

(6) Unless otherwise specified by the creating authority, at its first meeting in each year each advisory council shall elect a chairman and such other officers as it considers necessary.

(7) Unless otherwise specified by the creating authority, each advisory council shall meet at least annually and shall also meet on the call of the creating authority or the governor, and may meet at other times on the call of the chairman or a majority of its members. No advisory council may meet outside the city of Helena without the express prior authorization of the creating authority.

(8) A majority of the membership of an advisory council constitutes a quorum to do business.

(9) Except as provided in subsection (10) of this section, no advisory council may be created or appointed by a department head or any other official without the approval of the governor. In order for the creation or approval of the creation of an advisory council to be effective, the governor must file in his office and in the office of the secretary of state a record of the council created showing the council's:

(a) Name, in accordance with subsection (2) of this section.

(b) Composition.

(c) Names and addresses of the appointed members.

(d) Purpose.

(e) Term of existence, in accordance with subsection (11) of this section.

(10) The board of education, the attorney gener[illegible] and the superintendent of public instruction may create advisory c[illegible]cils, which shall serve at their pleasure, without the approval of the governor. They must file a record of each council created by them in the office of the governor and the office of the secretary of state in accordance with subsection (9) of this section.

(11) No advisory council may be created to remain in existence longer than two (2) years after the date of its creation or beyond the period required to receive federal or private funds, whichever occurs later, unless extended by executive order of the governor, or by the board of education, the attorney general, or the superintendent of public instruction for those advisory councils created in the manner set forth in subsection (10) of this section. If the existence of an advisory council is extended, they shall specify a new date, not more than two (2) years later, when the existence of the advisory council ends, and file a record of the order in the office of the governor and the office of the secretary of state. The existence of any advisory council may be extended as many times as necessary.

(12) As used in this subsection, "advisory body" means an administratively created agency which acts in an advisory capacity. The department head of each department created by this act shall, upon the effective date of the applicable chapter of this act, file a record of each advisory body within the department not abolished by this act. The record shall be filed in accordance with subsection (9) of this section.

Upon the filing of such record, the provisions of this section shall apply to each such advisory body.

ALLOCATION OF FISCAL YEAR 1973 FORMULA FUNDS

The utilization of Comprehensive Health Planning Councils for the purposes of alcoholism planning is a reasonable and rational assumption. Each of the 5 Comprehensive Health Planning Districts is made up of 2 or more of the 12 planning regions designated as Governor's Planning Regions by Governor Forrest H. Anderson in Executive Order 2-71 on August 24, 1971. These 12 planning regions are being utilized for a number of purposes. The original Montana State Plan for Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation, submitted for Fiscal Year 1972, had planned to use the 12 planning regions for the purposes of community organization and for development of a community based decision making process for alcohol planning and programming. However, the press of time, lack of staff and money to do such organization has prompted us to look very closely at amalgamating such planning regions and the most logical way to go along this line is toward the Comprehensive Health Planning Districts. The A-95 Clearinghouse, in its sign-off dated 3/6/73, also encouraged utilization of such planning areas. (See attached maps)

At the time of this writing, 4 of the 5 districts designated as Comprehensive Health Planning Districts in the State of Montana have organized Comprehensive Health Planning agencies. These agencies

commonly known as 314(B) agencies, are functional in terms of both staff and well organized and functioning advisory councils. They serve in planning, review and comment function, and have administrative capabilities. Comprehensive Health Planning District #3 (Eastern Montana) will shortly have an agency designated as the 314 (B) Comprehensive Health Planning agency for that area of the state.

If, in fact, alcoholism and alcohol abuse programs are part of the health delivery system, then the planning activities locally aimed at provision of health services should also be involved with alcohol abuse. Alcoholism has been identified on more than one occasion as one of the leading health problems at the local level throughout the state, and in fact at one time was designated by the State Comprehensive Health Planning Council as one of their 3 top priorities.

The allocation of formula grant monies into equal portions to the Comprehensive Health Planning Districts and to the Montana Indian Commission on Alcohol & Drug Abuse will provide for the most equitable and reasonable distribution of the limited funds available to the State of Montana from alcoholism formula funds. The previously mentioned reasons for re-consideration of the priority setting system on a statewide level has proven its inadequacies and inequities, and having the capability to make those decisions locally

will greatly assist in development of a more viable plan. The above funding method does not include statewide priorities, the ranking system has been eliminated in favor of regional priority setting by persons in those regions.

The monies will be made available from this allocation following the indication or agreement on the part of the 314(B) Health Planning Council to accept the responsibility for the development of a region plan for alcohol abuse and alcoholism prevention, treatment and rehabilitation in its planning area and for administration of those funds.

Following this designation of intention to do so, the 314(B) agency will have 90 days in which to submit a document with the plan for allocation of the monies regionally. Options to be utilized might be among the following: (1) The Comprehensive Health Planning agency could hire or contract within the region for a person in the field of alcohol abuse and alcoholism to act as a co-ordinator/planner for efforts and activities relative to this area of health delivery. (2) Another possible alternative would be for the total sub-granting or contracting of the $27,000 to another agency or council within the planning district. This could be the Comprehensive Mental Health Planning group, an alcoholism planning group or advisory council, or a specific agency or a consortium of agencies. (3) The money could be sub-granted on a grant basis

following a regional application, review, comment, and approval of grants-in-aid to local programs and facilities providing direct service to the alcohol abuser and his or her family. (4) Any other alternatives or combination acceptable to the regional health planning groups and the state agency.

UTILIZATION OF 1973 FORMULA FUNDS

The utilization of the formula grant monies available to the State of Montana for the fiscal year 1973 as authorized by P. L. 91-616 is as follows:

Allocation to Planning Areas (6 allocations of $27,000 each)		$162,000
Discretionary Funds		$ 13,000
Films	$3,000	
Pamphlets & Literature	$3,000	
Training	$8,000	
Evaluation	$4,000	
Administration		$ 20,000

All of the 1973 formula grant funds will be carried over into fiscal year 1974. None of the 1973 funds will be disbursed until after the beginning of July 1, 1973.

A portion of the discretionary monies will be utilized by the Alcohol and Dependent Drug Bureau of the Department of Health and Environmental Sciences, to purchase films and audio visual materials to be placed in the departmental film library and to be

made available to citizens of the state through the usual film library procedures. These audio visuals will be available on a loan basis to local programs throughout the state. Other uses of these monies will include purchasing pamphlets and literature in volume so that they may be distributed to local programs at a minimal cost to provide for a maximum utilization of the monies available to purchase such materials.

It will be necessary to continue activities aimed at defining level of need, and understanding and interpretation of need on the part of both state and local program personnel, boards, and individuals. This will also provide a limited amount of funding so that evaluation may be carried out by direct service from this Department or through contractual arrangements with other agencies within the State of Montana or from outside the State. These evaluative efforts would be carried out by the Alcohol and Dependent Drug Bureau of the Department of Health and Environmental Sciences. This would not supersede or eliminate the need for evaluation that could be contracted by local program.

Training of professional, para-professional and developing personnel is still the high priority in the Montana State Plan and a portion of this money is being allocated for this purpose.

During our recent program visits throughout the State, we have talked with numerous Board members of local programs who

were uninformed about current aspects of alcoholism programming. We strongly believe that Board members should be conceptually ahead of their staff instead of lagging behind. We will encourage Board members to take advantage of training opportunities.

Short term training in recognized programs such as the Utah Summer School of Alcohol Studies, the International School of Alcohol Studies in North Dakota, seminars and training institutes of similar nature will be given consideration for funding. Travel and per diem expenses at prevailing state rates will be paid, as well as registration fees for successful applicants. Applicants for such reimbursement must show acceptance by the particular training program in their application to this Department, and must show that the training is relevant and applicable to their particular work situation, and must submit a short narrative summary report following the training experience.

Short term seminars and training programs for personnel of related programs in communities will be encouraged. Such programs of several days to a week in length, conducted by local alcoholism programs, local colleges or university units will be encouraged and will be funded within a reasonable dollar figure. A resume of the proposed program and a proposed budget should be submitted to the Department following regional review and sign-off by CHP Council.

Applicants should consider contacting the Bureau as early as possible in the application procedure to the specific training program to assure that there is a possibility of funding being made available through the Bureau. The Bureau itself will conduct training as necessary and has made tentative arrangements with specific training programs and will provide scholarships in the form of per diem and travel expenses to such training. Such training may be either clinical or of a specialized nature. The Bureau will not pay the salaries of the personnel from local programs during the training.

Ten percent of the formula grant allotment is being requested to pay for administration of the state plan. Costs to be covered by this amount of money include:

1. Salary and fringe benefits for Health Educator II, administrative title of Program Representative, who will work on provision of technical assistance and consultation to local programs.

2. Materials and services such as printing, xerox, and photocopying, telephone, rent, expendable and desktop supplies, minor office equipment.

3. Staff travel in development and administration of state plan.

4. Expenses of Alcoholism Advisory Council, per diem and travel at rates not to exceed those authorized by state statute.

5. Agency membership in alcoholism organizations.

The amount of funds available for grant-in-aid use throughout the state will be substantially less for fiscal year 1973 than was available during fiscal year 1972. During fiscal 72, the Board of Crime Control made $100,000 available for Alcohol & Drug programs. The Department of Health administered these special grant funds but has been informed by the Board of Crime Control that no further funds will be allocated for this purpose.

INVOLVEMENT OF THE MONTANA INDIAN COMMISSION ON ALCOHOL AND DRUG ABUSE

The Montana Indian Commission on Alcohol and Drug Abuse has been recognized by the Montana Inter-Tribal Policy Board as speaking for Indian alcoholism program interests in the State of Montana. The Montana Inter-Tribal Policy Board is recognized by the State of Montana as the body for co-ordinating various Indian programs and planning throughout the State. With their designation and recognition of the Montana Indian Commission on Alcohol & Drug Abuse, this Department also recognizes the MICADA as the co-ordinating body for Indian alcoholism programs in the State of Montana.

An allotment from the state formula grant monies, equal in amount to that being allocated to comprehensive health planning districts, will be made available to the MICADA. The amount of $27,000 will be made available beginning July 1, 1973 and continuing through June 30, 1974. The monies will be utilized by the MICADA to hire a co-ordinator and a bookkeeper-stenographer with the purposes of establishing an office. This will provide the Indian alcoholism programs in the State of Montana with a focal point for coordination of various program and planning activities. This will also provide for a uniform repository of data concerning programs and clients. From this will develop liaison with the various units of state government concerned with alcoholism programming, with federal agencies operating such as BIA and Indian Health Service, and providing a focal point as well for relationship with Montana Indian Alcoholism Programs to NIAAA.

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The MICADA will be asked to develop that portion of the Montana State Plan for Alcoholism Prevention, Treatment, and Rehabilitation, having to do with Indian Alcoholism and Indian Alcoholism Programming. The accumulation and development of a data base providing indicators of the scope of Indian alcoholism problem, the utilization of reservation and off-reservation programs and activities for the treatment and rehabilitation of the Indian alcoholic, and the development of a plan for the operation of the MICADA and its co-ordinative function.

The recognition of the magnitude of the Indian alcoholism problem and the co-operative efforts on the part of Indian alcoholism program staff, MICADA, the Addictive Disease Unit of the Governor's Office, the Alcohol and Drug Dependence Bureau of the Department of Health & Environmental Sciences, and other agencies is recognition of the need and want to work and plan together for resolution of common problems. A meeting held on May 10, 1973 with representatives of the Montana Indian Commission on Alcohol & Drug Abuse, the Denver Regional Office, NIMH and NIAAA, Denver, and the State Department of Health & Environmental Sciences, was most productive in negotiating an acceptable apportionment of state formula grant monies for the development of such a co-ordinating capability in MICADA. The amount agreed upon from the formula grant monies

to be made available was $25,000, to then be firmed up with further negotiations. This later meeting was attended by two members of the staff of the Alcohol and Drug Dependence Bureau of this Department. It was held May 15, 1973 in Browning.

At that time MICADA requested $33,000 in order to properly operate the activity that they felt was necessary for co-ordination of Indian Alcoholism Programming in the State. The increase from $25,000 to $33,000 was discussed at considerable length and it was mutually agreed that the Bureau would request $27,000 for MICADA, as well as an equal amount for the five areas to be further delineated for planning purposes within the state.

On May 18, 1973 in a telephone conversation between Miss Wanda Small, secretary of the Montana Indian Commission on Alcohol & Drug Abuse, and Robert L. Solomon, Bureau Chief, Alcohol & Drug Dependence Bureau of the Department, the MICADA requested an additional $2,700 to be utilized as administrative costs by Tri-State Tribes, Inc. for provision of administrative and technical assistance services to MICADA, as requested by Inter-Tribal Policy board in their actions and discussions of that date.

It is the feeling of this agency that we did negotiate in good faith on both prior occasions and feel that at this time it is essential that we establish a level of funding that is

realistic and within the boundaries of currently available funding. Consequently, the figure of $27,000 is the figure that will be held to and will be that maximum figure allocated at this time to MICADA and to the 314(B) Comprehensive Health Planning agencies. It is possible, however, at a later date and as the 1974 plan is developed that additional monies may be made available. These could be from lapsing 1973 funds, or could be from funds to be made available as a result of the development, submission, and approval of the 1974 State Plan for Alcohol Abuse & Alcoholism Prevention, Treatment and Rehabilitation, or from other sources that may be developed.

In all instances, these monies are being made available as seed money and as developmental money. The motivation to receive further funding will be to develop alternate supplemental sources of funding. Indian organizations such as the Inter-Tribal Policy Board, tribal councils, and other agencies will be asked to assist in the funding situation. Requests will be made and encouraged toward tribal government to provide for a portion of the General Revenue Sharing funds being made available to Indian tribes. It is not the intention of this Department to provide 100% funding over the long run for the MICADA. It is our intention that this money will provide a funding start, and provide for a minimal base of operations for the Montana Indian Commission on Alcohol & Drug Abuse.

PARTICIPANTS IN MEETINGS CONCERNING REVISIONS TO
THE 1973 STATE PLAN FOR ALCOHOLISM PREVENTION, TREATMENT AND REHABILITATION

Thursday, May 10, 9:00 a.m., Conference Room, Cogswell Building, Helena

Sylvester Knows Gun, Sr., Chairman, MICADA*, (Northern Cheyenne)
Wanda Small, Secretary, MICADA, (Northern Cheyenne)
Wilbur Watt, Treasurer, MICADA, (Bilaminco, Billings)
Stephen Fox, MICADA, (Fort Belknap)
Ken Ryan, MICADA, (for Jack Pipe, Jr., Fort Peck)
Mr. & Mrs. Thomas Gallineaux, MICADA, (Blackfeet)
Dennis Dumont, MICADA, (Flathead)
Caroline Kelley, Alcohol & Drug Dependence Advisory Council
Ted Fasso, NIMH, Region VIII, Denver
William Richardson, NIAAA, Region VIII, Denver
John S. Anderson, M.D., Director, Department of Health & Environmental Sciences
Richard Welch, M.D., Administrator, Health Services Division, Department of Health & Environmental Sciences
Robert L. Solomon, Alcohol & Drug Dependence Bureau, Bureau Chief
Paul H. Babbitt, Alcohol & Drug Dependence Bureau, Program Representative

Thursday, May 10, 1:30 p.m., Conference Room, Cogswell Building, Helena

All of above plus:
Joseph S. Rothstein, Ph.D., Addictive Disease Unit, Governor's Office
Dorothy Eck, State-Local Coordinator
Robert Van Horne, Ph.D., Chairman, Alcohol & Drug Dependence Advisory Council
Larry Schroeder, Alcohol & Drug Dependence Advisory Council
H. William Coder, Chairman, Cascade Council on Alcohol and Providence Resocialization Center, and Chairman, Montana Community Alcoholism Programs
Ken Lee, Providence Resocialization Center
Mike Sweeney, Federal-State Coordinators Office

*MICADA - Montana Indian Commission on Alcohol and Drug Abuse

MT/DHES/ADDB 6/73

MEETING, MICADA, BROWNING, MAY 15, 1973

Sylvester Knows Gun, Sr., Chairman (Northern Cheyenne)

Jack A. Pipe, Jr., Vice-Chairman (Fort Peck)

Wanda Small, Secretary (Northern Cheyenne)

Wilbur Watt, Treasurer (Bilaminco, Billings)

Mr. & Mrs. Thomas Gallineaux (Blackfeet)

Harold Stone (Crow)

Stephen Fox (Fort Belknap)

Robert L. Solomon, Alcohol & Drug Dependence Bureau

Paul H. Babbitt, Alcohol & Drug Dependence Bureau

UTILIZATION OF RESOURCES AND PROJECTION OF NEED

Data pertaining to alcohol program utilization and projections of future program needs will be gathered by the Comprehensive Health Planning Councils in the Districts.

All such data and projections of need will be forwarded to the State Health Department where they will be completed and analyzed for incorporation into future state plans.

The nature of the data to be gathered and the criteria for projections of future needs will be determined by the State Alcohol Authority so as to maintain a state-wide uniformity of data that will be useful as a planning tool.

Program data to be collected in the districts will be developed into a uniform format. This reporting system will produce the same categories of information from each planning district.

Data for the projection of needs will come from the vast body of information that has been and is being collected, on a county basis, for Comprehensive Health Planning purposes. Such data will be of both objective and subjective nature, and will be locally generated.

AVAILABILITY & DISTRIBUTION OF STATE ALCOHOLISM PLAN

The 1972 State Plan for Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation was developed with a minimal number of copies being xeroxed for review by the state agencies and required number of copies to federal agencies. Following that, 300 copies of the State Plan were then printed and distributed to programs, to individuals, to libraries throughout the state, and sent to state alcoholism authorities in other states. The 1973 State Plan was similarly developed with a minimal number of copies being xeroxed for developmental purposes, and then it was printed, as submitted. The first copies collated were those that were submitted, and then as other copies were collated and developed they were made available upon request. The 1973 State Plan was generally distributed at the meeting of the Advisory Council, and has been distributed upon requests since then. We have attempted to keep a register of those persons to whom copies have been sent so that any additions, corrections, or supplements can be mailed to them for addition to their file copy.

Although there have been a number of comments about the unavailability of the Montana State Alcoholism Plan, we feel very strongly that it has been made available. We have received numerous comments from various agencies that our plan is

one of the most readily available, and one that can be seen and is being utilized in a great number of social service agencies throughout the state.

We consider this to be a public document and will do everything that we can to see that it is as readily available as possible. Those copies that were made available for review and comment, however, were made available in the departmental offices here in Helena. We do not maintain offices in other locations in the state, however, in the future plan development arrangements can be made for the state plan to be made available at other locations throughout the state. The logical procedure would be to utilize the offices of Comprehensive Health Planning agencies for this purpose.

North Central Montana Health Planning Council

424 MAIN STREET,
SHELBY, MONTANA 59474

Levi Taft, Coordinator

STATE DEPARTMENT OF HEALTH
JUN 1 1973
RECEIVED

May 29, 1973

Mr. Robert Solomon
Health Services Division
Montana Department of Health
and Environmental Sciences
Alcohol & Dependent Drugs Bureau
510 Logan Street
Helena, Montana 59601

Dear Mr. Solomon:

The North Central Montana Health Planning Council is in the process of identifying health needs in our areawide. We recently held a meeting in Choteau for this purpose. The results of this meeting clearly show that alcohol and drug problems are the number one concern of the citizens of Teton County. We will keep you informed of the results of our work in other counties so you can determine the magnitude of this problem.

It is my hope that this contact with you will alert you to the urgency of this problem in our areawide, and provide a basis for further communication.

Identification of health needs in our areawide is moving rather slowly as we have limited staff available for this work. Our present staff of "one" is going to be hard put to provide an effective program for the people of this area to plan and develop programs that can attack these problems. We will work with you in any way that we can to solve these problems.

Our Health Services and Planning Committee will meet soon to determine the direction of our efforts. If we should require information from you, would you be willing to attend one of these meetings as a guest speaker?

I have enclosed the results of our efforts to determine health needs in Teton County. I hope you will find them informative.

Sincerely,

Levi Taft

Levi Taft
Executive Director

LT/am
Enclosure

NORTH CENTRAL MONTANA HEALTH PLANNING COUNCIL

MINUTES OF MEETING
OF THE
BOARD OF DIRECTORS
Fort Benton, Montana
May 24, 1973

CALL TO ORDER: The meeting was called to order by Dr. Crabtree at 9:50 p.m.

MINUTES: The minutes of the January 24, 1973 Board Meeting were read and approved. The minutes of the April 1, 1973 Board Meeting were read and approved. The Secretary read the minutes of the Executive Meeting held in Great Falls on May 16, 1973. The minutes were approved as read.

Those in attendance were as follows:

NAME	COUNTY
Kathryn Turcotte	Hill
James R. Adams	Fergus
Don Sessions	Cascade
Gary Day	Cascade
Fred Holbrook	Cascade
Ray L. Amundson	Cascade
Doris Morgan	Pondera
Robert R. Emrick	Pondera
Roy Wodarz	Liberty
Edward Morse	Fergus
John G. Nesbo	Toole
Roy Goodell	Teton
Bob Brendgard	Liberty
Orin Cure	Cascade
John Soderberg	Chouteau
Richard Crabtree	Teton
Elmer Richey	Toole

A motion to ratify the actions of the Executive Committee meeting of May 16, 1973 was made by Orin Cure and seconded by Ray Goodell. Motion carried.

ELECTION OF EXECUTIVE COMMITTEE: An election was held to elect four members to the Executive Committee. The nominees were:

Rev. John Soderberg	Past President	Consumer	Fort Benton
Ray Amundson	Architect	Consumer	Great Falls
Orin Cure	Attorney	Consumer	Great Falls
Sr. Barbara Ann Brenner	Hospital Administrator	Provider	Fort Benton
Gary Day	Mountain States RMP	Provider	Great Falls

A motion to close the nominations was made by Bob Emrick and seconded by Roy Goodell. The members elected to the committee were John Soderberg, Ray Amundson, Orin Cure and Sister Barbara Ann Brenner. The newly elected members of the Executive Committe joined Dr. J. R. Crabtree, President; Edward Morse, Vice President; and Elmer Richey, Secretary-Treasurer.

OGRAM: An address was given by Bob Solomon of the State Alcohol and Dependant Drugs Bureau. Mr. Solomon explained the funds available for planning areas for the alcoholism program and the possibility of NCMHPC receiving these funds and setting up programs acceptable to the State Alcohol and Dependant Drugs Bureau. The funds available can be used for planning or can be sub-granted to existing alcohol programs. After completing his talk, Mr. Solomon accepted questions from the Council. After completion of the discussion, a motion to indicate NCMHPC in accepting the State Alcoholism Formula Program as submitted by Mr. Robert Solomon was made by Fred Holbrook and seconded by Orin Cure. Motion carried.

NEW BUSINESS: Fred Holbrook suggested a list be compiled by the Executive Director, Levi Taft, of all the Directors serving the NCMHPC. The list is to show if they are consumers, providers, appointees of the County Commissioners, etc. The list is to be sent to all Directors.

BOARD MEETING: The date of the next Board Meeting is to be at 7:30 p.m. on Wednesday, September 12, 1973. The place of the meeting is to be announced at a later date. A motion establishing the date of the next meeting was made by John Soderberg and seconded by Orin Cure. Motion carried.

It was suggested that Dr. Crandall, Director of the Great Falls Mental Hygience Clinic, be invited to participate but not vote in our future board meetings. The motion was made by John Soderberg and seconded by Roy Wodarz. Motion carried.

ADJOURNMENT: There being no further business, the meeting was adjourned at 11:00 p.m.

Minutes recorded by

Elmer Richey, Secretary-Treasurer

ADDENDA

LICENSED WITH PROVISIONAL LICENSE AS HALF-WAY HOUSES

		PROVISIONAL	No. 1	EXPIRES
New Horizon Treatment Center 1101 Missoula Helena, Montana	Alcohol and Narcotic Treatment Facility	20 beds		July 31, 1973
New Horizon Half-Way House 229 East Sixth Helena, Montana	Half-Way House	16 beds	No. 2	July 31, 1973
New Directions Half-Way House 225 South Idaho Street Butte, Montana	Half-Way House	15 beds	No. 3	July 31, 1973
Northern Montana Council on Alcohol and Other Dependent Drugs, Inc. 1020 Assiniboine Havre, Montana	Half-Way House	19 beds	No. 4	July 31, 1973
Providence Resocialization Center 920 Fourth Avenue North Great Falls, Montana Phone: 452-7476 Paul Davis, Jr., Director	Half-Way House	20 beds	No. 5	July 31, 1973
Miles City Half-Way House 115 North Second Street Box 114 Miles City, Montana	Half-Way House	10 beds	No. 6	July 31, 1973
Our House 650 West Pine Street Missoula, Montana	Half-Way House	10 beds	No. 7	July 31, 1973
Northwest Montana Alcohol and Drug Information and Referral Center 111½ Second Street West Kalispell, Montana	Half-Way House	12 beds	No. 8	July 31, 1973
Big Sky Half-Way House 332 Grand Avenue Billings, Montana	Half-Way House	10 beds	No. 9	July 31, 1973
Frontier Half-Way House 1100 Atlantic Dillon, Montana Lilly Weinrich, Director	Half-Way House	15 beds	No. 11	July 31, 1973

HALF-WAY HOUSES

Big Sky Half-Way House
322 Grand Avenue
P. O. Box 645
Billings, Montana 59103
John Lee, Director
Phone: 259-0940

New Directions Half-Way House
225 South Idaho
(Old) St. James Hospital
Butte, Montana 59701
James Forsell, Director
Phone: 723-9003

Frontier Half-Way House
1100 South Atlantic
Dillon, Montana 59725
Lilly Weinrich, Director
Phone: 683-4305

Providence Resocialization Center
920 Fourth Avenue North
Great Falls, Montana 59401
Paul Davis, Jr., Director
Phone: 727-2512

New Horizon Treatment Center
In-Patient Treatment Facility
1101 Missoula Avenue
Helena, Montana 59601
Bob Sallgren, Director
Phone: 442-0790

New Horizon Aftercare Center
229 East Sixth Street
Helena, Montana 59601
Phone: 442-8331

Opportunity House
Ronan, Montana 59864
Dennis Dumont, Coordinator

Northern Montana Council on Alcohol
and Other Dependent Drugs, Inc.
Recovery Center
1020 Assiniboine
Havre, Montana 59501
Herbert Bauer, Director
Phone: 265-9665

Northwest Montana Alcohol and Drug
Information Referral Center
30 Fifth Avenue West
Kalispell, Montana 59901
Will Walter, Chairman
Phone: 756-2475

Miles City Half-Way House
115 North Second
Miles City, Montana 59301
Arnold Mickelson, Director
Phone: 232-9830

Our House
650 West Pine
Missoula, Montana 59801
Myron J. Mason, Director/Counselor
Phone: 728-9922

Half-Way House
Poplar, Montana 59255
Jack Pine, Coordinator

Northern Cheyenne Half-Way House
Lame Deer, Montana 59043

SIRS

(Statutory Information Retrieval System)

With the cooperation of the Division of Planning and Economic Development of the Montana Department of Intergovernmental Relations, a computer search of the Revised Codes of Montana has been completed. This soft-ware package, known by the acronym SIRS (Statutory Information Retrieval System), has enabled the Department to utilize key words to find those sections of the State codes that refer to alcoholism and related areas. By utilizing these key words, it has been possible to search the codes and print the specific citation in the codes, or the full text of the section containing the key word.

Two separate and distinct searches have been done of SIRS and the material is on file in the offices of the Alcohol and Dependent Drug Bureau of this Department. The first search utilized 13 words, and 269 references were printed containing those words. The search words in the first program were alcohol, alcoholics, alcoholism, drunks, drunkard, drunkard's, drunken, drunkenness, intoxicants, intoxicated, intoxicating, and intoxication.

The second search had 979 references printed from the Revised Codes of Montana. The key words for the second search were beer, beer dispensing, liquor, liquors, wine, and wines.

This search utilizing the computer program available to agencies in the State of Montana has made it possible for us to electronically, in a matter of seconds, search the entire existing codes and find those citations and sections of code that refer to the areas of concern to the field of alcohol abuse and alcoholism, prevention, treatment, and rehabilitation. According to information that we have received from the Division of Planning and Economic Development, Montana is one of four states utilizing this soft-ware package, and is the only one west of the Mississippi participating in the program. All these searches mentioned above were conducted prior to January 1, 1973, and do not reflect changes or proposed changes that may come about due to legislative action this year. The Montana State Legislature is in session at the time of the writing of this material. Examples of the computer print-out are attached.

Inquiries concerning specific sections of the statutes are to be encouraged and we will welcome anyone to come into the office and review the complete print-out. Individual pages and references are of such form that they can be copied through office copying machines and made available in that format.

A listing of pertinent citations has been requested, and a limited number will be printed and made available upon request.

QUERY MONTANA 27-278 FOR ALCOHOL & DRUG DEPEND BUREAU.

REVISED CODES OF MONTANA 2-209. PRINCIPAL'S RESPONSIBILITY FOR AGENT'S NEGLIGENCE OR OMISSION. *

REVISED CODES OF MONTANA 4-101. CITATION OF STATE LIQUOR CONTROL ACT--DECLARATION OF POLICY--SUBJECT MATTERS OF REGULATION UNDER ACT. *

REVISED CODES OF MONTANA 4-102. DEFINITIONS. *

REVISED CODES OF MONTANA 4-122. CONVEYANCE OF LIQUORS--OPENING LIQUOR DURING TRANSIT FORBIDDEN. *

REVISED CODES OF MONTANA 4-134. DRUGGIST ALLOWED LIQUOR--SALE OF LIQU BY DRUGGIST, WHEN AUTHORIZED. *

REVISED CODES OF MONTANA 4-140. APPLICATION OF ACT. *

REVISED CODES OF MONTANA 4-141. PREPARATIONS NOT SUBJECT TO ACT. *

REVISED CODES OF MONTANA 4-142. LOCAL OPTION LAW--PETITION--TIME FOR ELECTION. *

REVISED CODES OF MONTANA 4-144. BALLOTS, WHAT TO CONTAIN. *

REVISED CODES OF MONTANA 4-146. DEALING IN INTOXICATING LIQUORS PROHIBITED IF MAJORITY OF VOTE AGAINST SALE. *

REVISED CODES OF MONTANA 4-148. SALE OF LIQUORS PROHIBITED. *

REVISED CODES OF MONTANA 4-150. SALE OF LIQUOR UNLAWFUL, WHEN--FOREIG SUBSTANCE IN LIQUOR FORBIDDEN--POSSESSION OF LIQUOR, WHEN UNLAWFUL. *

REVISED CODES OF MONTANA 4-159. PERSONS NOT TO CONSUME LIQUOR OR BE INTOXICATED IN PUBLIC PLACES. *

REVISED CODES OF MONTANA 4-160. SALES TO INTOXICATED PERSONS
REVISED CODES OF MONTANA 4-161. AGE LIMIT FOR SALE OF LIQUOR. *

REVISED CODES OF MONTANA 4-167. DRUNKENNESS WHEN AND WHERE NOT TO BE PERMITTED. *

REVISED CODES OF MONTANA 4-204. APPLICATION AND SETTING ASIDE ORDER O INTERDICTION--RESTORATION OF RIGHTS--NOTICE OF APPLICATION. *

REVISED CODES OF MONTANA 4-219. PRESUMPTION OF INTOXICATING LIQUOR ARISES, WHEN. *

REVISED CODES OF MONTANA 4-238. PREMISES WHERE LIQUOR ILLEGALLY SOLD COMMON NUISANCE. *

REVISED CODES OF MONTANA 4-301. CITATION OF ACT--DECLARATION OF POLIC *

REVISED CODES OF MONTANA 4-302. DEFINITIONS. *

REVISED CODES OF MONTANA 4-304. SALE OF BEER DURING CLOSED HOURS

QUERY MONTANA 27283 FOR ALCOHOL & DRUG DEPEND BUREAU.

"Revised Codes of Montana 32-2142. Persons under the influence of intoxicating liquor or of drugs. "

(a) It is unlawful and punishable as provided in paragraph (d) of this section for any person who is under the influence of intoxicating liquor to drive or be in actual physical control of any motor vehicle upon the highways of this state.

(b) In any criminal prosecution for a violation of paragraph (a) of this section relating to driving a vehicle while under the influence of intoxicating liquor, the amount of alcohol in the defendant's blood at the time alleged as shown by chemical analysis of the defendant's blood, urine, breath or other bodily substance, shall give rise to the following presumptions:

1. If there was at that time 0.05 per cent or less by weight of alcohol in the defendant's blood it shall be presumed that the defendant was not under the influence of intoxicating liquor:

2. If there was at that time in excess of 0.05 per cent but less than 0.10 per cent by weight of alcohol in the defendant's blood, such fact shall not give rise to any presumption that the defendant was or was not under the influence of intoxicating liquor, but such fact may be considered with other competent evidence in determining the guilt or innocence of the defendant:

3. If there was at that time 0.10 per cent or more by weight of alcohol in the defendant's blood, it shall be presumed that the defendant was under the influence of intoxicating liquor:

4. Per cent by weight of alcohol in the blood shall be based upon grams of alcohol per one hundred (100) cubic centimeters of blood:

5. The foregoing provisions of paragraph (b) shall not be construed as limiting the introduction of any other competent evidence bearing upon the question whether or not the defendant was under the influence of intoxicating liquor.

(c) It is unlawful and punishable as provided in paragraph (d) of this section for any person who is an habitual user of or under the influence of any narcotic drug or who is under the influence of any other drug to a degree which renders him incapable of safely driving a motor vehicle to drive a motor vehicle within this state. The fact that any person charged with a violation of this paragraph is or has been entitled to use such a drug under the laws of this state shall not constitute a defense against any charge of violating this paragraph.

(d) Every person who is convicted of a violation of this section shall be punished by imprisonment in the county or city jail for not more than six (6) months or by a fine of not less than one hundred dollars ($100.00) or more than five hundred dollars ($500.00) or by both such fine and imprisonment. On a second conviction he shall be punished by imprisonment in the county or city jail for not less than ten (10) days nor more than six (6) months, to which may be added, at the discretion of the court a fine of not less than three hundred dollars ($300.00) nor more than five hundred dollars ($500.00). On the third or subsequent conviction he shall be punished by imprisonment for a term of not less than thirty (30) days nor more than one (1) year, to which may be added at the discretion of the court a fine of not less than five hundred dollars ($500.00) nor more than one thousand dollars ($1,000.00).

(e) Each and every municipality in this state is hereby given authority to enact the foregoing paragraphs (a), (b), (c) and (d) of this section, with the word "state" in the first sentence of paragraphs (a) and (c) changed in each instance to read "municipality," as an ordinance, and is

EDUCATIONAL PROFILE OF ALCOHOLISM

PROGRAM STAFF IN MONTANA

	Director	Counselor	House Manager
Two years High School or less	2	8	1
High School Graduate	5	9	2
Two years College or less	6	10	1
College Graduate	-	3	1
Graduate School	3	2	-
TOTAL	16	32	5

This report based on 52% return of educational questionnaire.

An educational questionnaire (see next page) was sent to all staff persons involved in the Montana Alcoholism Programs.

Many of the questionnaires were not returned; however, the above information was compiled from the data collected during September 1972.

MONTANA DEPARTMENT OF HEALTH
AND ENVIRONMENTAL SCIENCES

ALCOHOL AND DRUG DEPENDENCE BUREAU

ALCOHOLISM PROGRAM PERSONNEL QUESTIONNAIRE

Your name_____ Age_____ Sex_____

Your agency_____

Your job title_____

Name of immediate supervisor_____

His title_____

Your job description (be specific & brief)_____

_____

_____

_____

Your education: High school years 1 2 3 4 GED yes no
College years 1 2 3 4 Degree yes no
Name of school_____
Major area of study_____

Graduate school Degree yes no
Name of school_____
Major area of study_____

Other training - include seminars, workshops, field training, institutes, and any other training_____

_____

_____

_____

_____

Work experience in alcoholism_____

_____

_____

_____

_____

Work experience in other fields_____

_____

_____

_____

_____

_____

_____

_____

_____

Are you a recovered alcoholic?_____

How long:_____

_____

Return to:

Alcohol and Drug Dependence Bureau
Montana Department of Health
and Environmental Sciences
Helena, Montana 59601

MONTANA DEPARTMENT OF HEALTH
AND ENVIRONMENTAL SCIENCES

ALCOHOL AND DRUG DEPENDENCE BUREAU

ALCOHOLISM PROGRAM PERSONNEL QUESTIONNAIRE

Your name_____ Age_____ Sex_____

Your agency_____

Your job title_____

Name of immediate supervisor_____

His title_____

Your job description (be specific & brief)_____

_____

_____

_____

Your education: High school years 1 2 3 4 GED yes no
College years 1 2 3 4 Degree yes no
Name of school_____
Major area of study_____

Graduate school Degree yes no
Name of school_____
Major area of study_____

Other training - include seminars, workshops, field training, institutes, and any other training_____

_____

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Work experience in alcoholism_____

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Work experience in other fields_____

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_____

Are you a recovered alcoholic?_____

How long:_____

_____

Return to:

Alcohol and Drug Dependence Bureau
Montana Department of Health
and Environmental Sciences
Helena, Montana 59601

CONSUMPTION OF BEER AND LIQUOR IN MONTANA

All beer and liquor sold in Montana is taxed by the Montana Liquor Control Board. Wines and distilled spirits are sold on a wholesale basis to bars and taverns through a centralized warehouse.

The Board operates 152 outlets in 146 communities. Beer is sold by private wholesalers and retailers throughout the State and may be purchased by the glass, the bottle, the can, six-pack, case, ¼ keg, ½ keg. Beer is sold in bars, taverns, supermarkets, and stores on a retail basis. Wine and distilled spirits are also sold for off premises consumption by bars and taverns and privately owned liquor stores, but are not sold in drug stores or supermarkets.

The Liquor Control Board reports the following total net income for the years listed:

1971-72	$15,198,939.16
1970-71	13,114,634.10
1969-70	12,065,915.45
1968-69	10,231,748.89
1967-68	9,863,791.90
1966-67	9,301,586.59

The consumption breakdown by county with per cent of State consumption and per cent of State population is as follows:

COUNTY	PER CENT OF STATE POPULATION 1970	PER CENT OF TOTAL SALES 1970-71	PER CENT OF TOTAL SALES 1971-72
*Beaverhead	1.17%	1.53%	1.40%
Big Horn	1.44	1.17	1.01
Blaine	.96	.81	.85
Broadwater	.36	.31	.32
Carbon	1.01	.98	.96

Carter	.28%	.21%	.16%
*Cascade	11.78	12.49	12.47
Chouteau	.93	.86	.68
*Custer	1.75	1.83	1.78
Daniels	.44	.38	.35
Dawson	1.62	1.25	1.18
Deer Lodge	2.25	2.19	2.07
Fallon	.58	.45	.40
Fergus	1.81	1.42	1.31
Flathead	5.63	5.41	5.72
Gallatin	4.68	4.36	4.60
Garfield	.25	.15	.14
*Glacier	1.55	2.17	2.28
Golden Valley	.13	.17	.09
*Granite	.39	.41	.38
Hill	2.49	2.34	2.34
Jefferson	.75	.59	.53
Judith Basin	.38	.34	.32
Lake	2.08	1.88	1.91
*Lewis & Clark	4.79	6.05	6.30
Liberty	.33	.23	.25
Lincoln	2.60	2.21	2.37
*Madison	.72	.75	.69
McCone	.41	.25	.23
*Meagher	.30	.33	.32
*Mineral	.42	.54	.62
*Missoula	8.39	8.42	9.00
*Musselshell	.53	.48	.55
*Park	1.61	1.88	1.86
Petroleum	.09	.07	.07
Phillips	.77	.62	.62
Pondera	.95	.92	1.10
Powder River	.41	.25	.22
Powell	.95	.94	.86
Prairie	.25	.19	.16
Ravalli	2.07	1.39	1.53
Richland	1.41	1.23	1.18
*Roosevelt	1.49	1.62	1.56
*Rosebud	.86	.96	.97
Sanders	1.02	.96	1.10
*Sheridan	.83	.92	.80
*Silver Bow	6.04	7.56	7.26
Stillwater	.66	.50	.50
*Sweetgrass	.42	.56	.53
Teton	.88	.63	.66
*Toole	.84	1.09	.94
Treasure	.15	.08	.09
Valley	1.65	1.42	1.27
Wheatland	.36	.35	.38
Wibaux	.21	.18	.16
*Yellowstone	12.58	12.73	12.60

NOTE: * indicates percentage of total sales exceeds percentage of State population by county.

APPARENT CONSUMPTION OF WINE IN MONTANA
For Calendar Years 1961-1971
Gallons

1961	292,000
1962	273,000
1963	272,000
1964	283,000
1965	294,000
1966	305,000
1967	328,000
1968	358,000
1969	385,000
1970	418,000
1971	474,360

PER CAPITA CONSUMPTION OF MALT BEVERAGES IN MONTANA
For Calendar Years 1961-1971
Gallons

Year	Total Population	21 Years & Over
1961	18.8	32.9
1962	19.2	34.0
1963	19.6	34.9
1964	19.7	35.0
1965	20.4	36.3
1966	20.8	36.9
1967	21.8	38.6
1968	21.7	37.3
1969	22.3	38.7
1970	24.1	42.4
1971	25.4	43.5

PER CAPITA CONSUMPTION OF WINE IN MONTANA
For Calendar Years 1961-1971
Gallons

Year	Total Population	21 Years & Over
1961	.43	.73
1962	.39	.69
1963	.39	.69
1964	.40	.71
1965	.42	.74
1966	.43	.77
1967	.47	.83
1968	.52	.90
1969	.55	.90
1970	.60	1.03
1971	.67	1.15

Source: Brewers Almanac, 1972, United States Brewers Association, Inc.

PER CAPITA CONSUMPTION OF DISTILLED SPIRITS IN MONTANA
For Calendar Years 1961-1971
Gallons

Year	Total Population	21 Years & Over
1961	1.18	2.02
1962	1.18	2.13
1963	1.20	2.15
1964	1.23	2.20
1965	1.30	2.31
1966	1.36	2.43
1967	1.42	2.51
1968	1.50	2.64
1969	1.58	2.75
1970	1.65	2.83
1971	1.71	2.93

Source: Brewers Almanac, 1972 United States Brewers Association, Inc.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
REGION VIII
FEDERAL OFFICE BUILDING
19TH AND STOUT STREETS
DENVER, COLORADO 80202

May 15, 1972

PUBLIC HEALTH SERVICE
HEALTH SERVICES AND MENTAL HEALTH
ADMINISTRATION

Mr. Robert L. Solomon, Chief
Alcohol and Drug Dependence Bureau
510 Logan Street
Helena, Montana 59601

Dear Mr. Solomon:

I have completed an informal review of the Montana State Plan for Alcohol Abuse and Alcohol Prevention, Treatment and Rehabilitation. I called your office to give my initial reactions and it was suggested that I follow up with a letter directly to you.

We were particularly pleased with your plan to continue survey and organizational activities in each of the community health planning districts. Such activities may provide a basis for future alcoholism prevention, treatment and rehabilitation programs. We suggest that Veterans Administration and Indian Health Service personnel be invited to participate in such meetings if they operate health programs within the comprehensive health planning district. Along this line, I would like to repeat my recommendation that the ex-officio members of the Alcoholism Advisory Council be expanded to include a Veterans Administration and Indian Health Service representative. As you know, we have not yet received the information on publishing the plan and we must have either the sign-off of the Governor or his Planning Officer, or 45 days for the plan to be available for consideration by him.

I well know that your bureau does not supervise any other agencies, but there's no such statement in the plan and we would like a statement to the effect that the State Alcoholism Authority does not supervise any other agencies.

We must have materials describing the duties of the Advisory Council Chairman. We also must have a statement of the cost of administration of the State Plan included and a statement about the anticipated use of funds other than the grant-in-aid funds.

While we do not anticipate a change for this year, we were aware that your plan contains no consistent data on the number or the professional training of the staff in the alcoholism treatment programs in Montana.

We anticipate some problems in your review of applications to use for the grant-in-aid funds. Your plan did not reflect any way for the reviewers to determine the amount of funding that might go to any one applicant. Although there were general priorities on comprehensiveness, continuity of care, accessibility of services, and programs for minority groups, there did not seem to be any priority for the type of services that might be funded and no ranking of the catchment area in terms for their needs for funds. In your evaluation of requests for funds, will you consider resources already available in the catchment area?

There is one additional point that must be included in the State Plan. We need a statement to the effect that no employee of the State Agency nor any firm, organization, or corporation that such employee may own, control, or direct shall receive funds from any applicant directly or indirectly in payment for services provided in connection with the plan.

Formal review is a joint effort of the Central Office of NIAAA and the staff of the Regional Office. I will be in touch with you by phone as soon as I have heard from the NIAAA.

Sincerely yours,

Stanley E. Mahoney, acting for

Theodore E. Fasso
Mental Health Program Specialist

JOHN S. ANDERSON, M.D.
XXXXXXXXXXX
Director

State of Montana

State Department of Health
and ENVIRONMENTAL SCIENCES
HELENA, MONTANA 59601
ALCOHOL AND DRUG DEPENDENCE BUREAU

June 13, 1972

Mr. Claude Reeder, Chief
State Assistance Branch
National Institute on Alcohol Abuse
and Alcoholism
Parklawn Building
5600 Fishers Lane
Rockville, Maryland 20852

Dear Mr. Reeder:

This letter and appended material will address points outlined in the May 15, 1972, review of the Montana State Plan for Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation as outlined by Mr. Theodore E. Fasso, Mental Health Program Specialist, Region VIII, Denver, Colorado.

Mr. Fasso suggested that the Veterans Administration and the Indian Health Service be invited to participate in meetings relative to the development of the Plan. This has been the case in that these agencies, along with those other agencies having interest in alcoholism programming, have always been invited to participate in the meetings of the Montana Alcohol and Drug Dependence Advisory Council. Mr. Fasso's recommendation that the Advisory Council include the Veterans Administration and Indian Health Service as ex-officio members has been addressed by the Advisory Council, as well as broadening other membership in the Council. The recommendation from the Council is that further additions or changes in the makeup of the Council be deferred at this time and that further study be made to insure that any additions or changes to the Council provide for maximum involvement and representation of those interests, programs, and agencies concerned with alcohol abuse and alcoholism in the State of Montana. This recommendation is contained in the Minutes of the Advisory Council meeting conducted on April 20, 1972, which were appended to the State Plan.

The signoff of Governor Forrest H. Anderson, the A-95 Clearinghouse sighoff, and the publication of notice of availability of the State Plan for review and comment are appended. The Notice of the availability was published in five newspapers of general distribution on April 28, 1972; and copies of the Plan were made available for review and comment at the administrative offices of the Department of Health and Environmental Sciences, Cogswell Building, and at the offices of the Alcohol and Drug Dependence Bureau, 510 Logan, in Helena. There were no written comments, recommendations, or

criticisms received by the office of the Director of the Department during the thirty-day period.

This Bureau does not supervise any other agencies, nor does it operate or carry out treatment or rehabilitative program activities. No employee of the Department of Health and Environmental Sciences nor any firm, organization, or corporation receives funds from any applicant directly or indirectly in payment for services provided in connection with the Montana State Plan for Alcohol Abuse and Alcoholism. Applicant agencies requesting subgrant funds will be required to submit a similar assurance.

The Chairman of the Advisory Council has the usual duties ascribed to a chairman. He may call meetings of the Council, preside over such meetings using Roberts Rules of Order; and he may appoint members to standing or ad hoc committees. He serves as spokesman to the Council in matters between the Council and the Director of the Department of Health and Environmental Sciences and may be called upon by the Director to represent the Council in meetings and conferences both in Montana and out of the State. The Chairman of the Council is also utilized by the Departmental staff for guidance, technical assistance, and comments upon activities and operations of the Bureau.

Two budget sheets are included with these materials. They are for the Fiscal Year 1972 budget for State general fund moneys available to the Bureau and a detailed budget for the expenditure of the administrative portion of the formula grant moneys from the period of April 1, 1972, through December 31, 1972. Although general fund moneys come to the Bureau for both alcohol and drug programming, an analysis of detailed time study for the Bureau Chief and the Clerk-Stenographer II for the period January 1, 1972, through May 31, 1972, show a total of 1,783 hours with 1,119 hours chargeable to activities relative to drug abuse programming. This is 62.8 percent of the time of this staff directed toward alcohol abuse and alcoholism with the remaining 37.2 percent directed toward drug abuse. These time studies are on-going activities of the Bureau and serve to show and justify that at least one half or more of the activities of the Bureau are directed toward alcohol abuse programming.

We appreciate that we do not have much information about background and training of the staff of alcoholism treatment activities in the State of Montana. We anticipate the development of this background information as we develop further material. We have, however, obtained information from the Alcohol Treatment and Rehabilitation Program at Galen State Hospital concerning job descriptions and requirements and also have appended a review of the background and training of the staff of the alcoholism treatment program conducted by the Helena Alcohol and Drug Association.

In the evaluation of requests for funds, resources and programming currently in the catchment area are being considered. A number of criteria have been reviewed to try to set overall priorities in terms of catchment areas. Those criteria are indicators of social problems, mental health resources, socio-economic factors, population factors, program dollars per estimated number of alcoholics in the catchment area, and adjusted ratings of patients with presenting problems of alcohol abuse upon admission to Warm Springs State Hospital.

A composite of these criteria indicate priorities for the establishment of new services and for the expansion of existing programs in the treatment and prevention of alcohol abuse and alcoholism. The highest priority for additional services is listed first; the lowest priority is last. Those priority rankings for catchment areas are:

Catchment Area I

Catchment Area V

Catchment Area II

Catchment Area III

Catchment Area IV

The consideration of resources and programs already available in the catchment area will be considered in the granting of formula funds to local programs as will other sources of funds and the concept of multiple funding of programs. As part of the in-house and staff review of applications, inquiries will be directed to other agencies and organizations that may help to provide in-put into the review process. Such agencies and organizations would be the mental health authority, comprehensive mental health centers, Governor's Crime Control Commission, Department of Social and Rehabilitative Services, State Office of Economic Opportunity, and other Bureaus and Divisions of this Department.

I trust the above comments sufficiently address the queries posed by Mr. Fasso. Should there be further questions or clarifications, please do not hesitate to contact us.

Sincerely,

Robert L. Solomon
Bureau Chief

RLS:ch

Enclosures

cc: John S. Anderson, M.D.
Robert L. Van Horne, Ph.D., Chairman
Theodore E. Fasso, Region VIII

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
REGION VIII
FEDERAL OFFICE BUILDING
19TH AND STOUT STREETS
DENVER, COLORADO 80202

June 28, 1972

PUBLIC HEALTH SERVICE
HEALTH SERVICES AND MENTAL HEALTH
ADMINISTRATION

John S. Anderson, M.D., Director
State Department of Health
and Environmental Sciences
Helena, Montana 59601

Dear Dr. Anderson:

The Montana State Plan, Alcohol Abuse and Alcoholism, Prevention, Treatment and Rehabilitation, was reviewed by the Central Office staff of the National Institute on Alcohol Abuse and Alcoholism, and the Regional Office Mental Health staff. It is noted that the Plan is well organized, comprehensive, and follows the guidelines very closely. The Plan was recommended for approval for immediate funding with the following recommendations related to continued and expanded planning and implementation.

1. Advisory Council Composition should be evaluated in terms of properly reflecting consumers and servicing agencies as well as geographic; cultural and ethnic; and socio-economic factors.

2. Further develop criteria and standards for reviewing and evaluating grant proposals and the determination of priorities.

3. More current and validated survey data in order to properly determine extent and types of needs, facilitate planning and establish priorities on a composite State basis. It is recognized that these are on-going procedures, but it would be well to include in the Plan detailed procedures for the uniform data collection system for establishing and up-dating priorities.

4. Provisions must be made for appropriate in-service training and staff development within the Alcohol and Dependent Drug Bureau in order to enhance their skills in providing development, training and other services to the target areas.

5. In considering the comprehensive planning necessary for the integration of the services and resources of other Departments and agencies (such as community mental health centers) specific procedures should be developed to insure proper consultation, review, participation, coordination, by and with other agencies.

If you have any questions, please let us know.

Sincerely yours,

Abel Garcia Ossorio, PH.D

Abel Garcia Ossorio, Ph.D.
Associate Regional Health Director
for Mental Health

cc: Mr. Robert Solomon

Department of Health and Environmental Sciences
STATE OF MONTANA HELENA, MONTANA 59601

John S. Anderson M.D.
DIRECTOR

Public Notice

The 1973 Montana State Plan for Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation, developed by the Montana Department of Health and Environmental Sciences, will be available for public review and comment for thirty days subsequent to the publication of this notice on Monday, February 26, 1973. Copies of this plan may be reviewed at the administrative office of the Montana Department of Health and Environmental Sciences, Room 200, Cogswell Building, corner of Roberts and Lockey in Helena, and at the Alcohol and Drug Dependence Bureau, 1424 Ninth Avenue, Helena.

This Montana State Plan for Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation is for the Fiscal Year 1973 and has been developed in accord with guidelines for the development of such plans as required by the National Institute on Alcohol Abuse and Alcoholism. The monies being sought through the development of this state plan are formula grant funds authorized to assist the states in the planning, establishing, maintaining, coordinating, and evaluating projects for alcohol abuse and alcoholism. This authorization is a major aspect of the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation Act of 1970, Public Law 91-616, commonly known as the Hughes Act.

The plan establishes long-range priorities for alcohol abuse and alcoholism programming in Montana as well as short-term priorities for utilization of the formula grant to be made available to the state.

Copies of this plan have been submitted to the Regional Office of the Department of Health, Education, and Welfare in Denver, Colorado for review and approval. Copies have also been submitted to appropriate state agencies for their review and comment.

Interested persons concerned with alcohol abuse and alcoholism programming are encouraged to review and comment upon the plan. Those wishing to comment within the next thirty days are encouraged to do so in writing to John S. Anderson, M.D., Director, Montana Department of Health and Environmental Sciences, Cogswell Building, Helena, Montana 59601.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
REGION VIII
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DENVER, COLORADO 80202

RECEIVED
FEB 2 1973
STATE DEPARTMENT OF HEALTH
& ENVIRONMENTAL SCIENCES

January 29, 1973

PUBLIC HEALTH SERVICE
HEALTH SERVICES AND MENTAL HEALTH
ADMINISTRATION

John S. Anderson, M.D., Director
Montana State Department of Health
and Environmental Sciences
Cogswell Building
Helena, Montana 59601

Re: Updating of State Plans for Alcoholism Formula Grant Programs

Dear Dr. Anderson:

You will recall that on December 14, 1972, Claude Reeder, Chief, State Assistance Branch of National Institute on Alcohol Abuse and Alcoholism, met in the Denver Regional Office with the Directors of the State Alcoholism Authorities of the six States in Region VIII, and members of the Regional staff.

The major decisions noted below, related to revising and updating of the State Plans and of their submission to the Regional Office for review and approval, were agreed upon. This summary is being sent to you at this time as a reminder of these decisions as you are preparing your revised Plans, and to advise you of the review process that will be followed in the Regional Office.

I. Submission Date

Updated Plans should be submitted as soon as possible in order to provide some spread of time in their receipt and review, and to enable the Regional Office to approve allocation of funds at the earliest possible date after funds become available. Deadline for submission, February 28, 1973.

II. Format

The Revised Draft Guidelines for the State Alcoholism Formula Grant Program, dated July 19, 1972, are written to reflect the decentralization of this program to the Regional Office. These guidelines have been distributed to the States and are to be used in revising the Plan.

The "long-form" procedure for continuation approval will be used. However, due to limitations of time and the fact that most States are still in the process of evolving various legislative provisions and organizational and operational procedures, the revisions for this second year's

Plan may be submitted as comprehensive addendum to the original Plan. This is in anticipation of a major overall rewriting of the Plan after greater stabilization of Federal, State and local legislative, organizational, operational and other factors having bearing on the Plan's format and content.

The second year's addendum material should reflect all refinements and modifications of the original Plan. It must include specific material related to appropriate resolution of conditions and recommendations made by Central and Regional Offices as part of the approval of the original Plan.

Each State must submit seven (7) copies of the original Plan along with the appropriate addendum material. The distribution of these copies will be as follows: Two (2) copies to Central Office, State Assistance Branch, NIAAA, Five (5) copies to Regional Office for following: (a) Two (2) work copies for reviewers, (b) One (1) master file copy, (c) One (1) copy for Grants Management, (d) One (1) copy for Comprehensive Health Planning Office.

It is recommended that the States submit additional copies for review and comment to appropriate in-State public and private agencies and organizations. Examples of this would be the Division of Mental Health when it is not the same as the Division of Alcoholism; Comprehensive Health Planning Authorities; various alcoholism advisory or planning groups, etc.

III. Review Procedure

A. Regional Office

1. The following Regional Office personnel will participate in the review of the Plans.

   (a) The Mental Health Consultant assigned to the State.
   (b) The Alcoholism Consultant assigned to the Regional Office.
   (c) When appointed, the Regional Program Director for Alcohol Abuse and Alcoholism.
   (d) The Assistant Regional Health Director for Mental Health.
   (e) The Regional Office, Comprehensive Health Planning Office will be provided with a copy of the Plan and will be given opportunity to make comments and recommendations.

2. Regional Office Review Meeting - March 22, 1973.

The personnel listed above will meet on this date to finalize review of the six State Plans. A representative of the Central Office, NIAAA State Assistance Branch will attend this meeting.

B. Central Office, NIAAA

Two (2) copies of the original Plan and addendum revisions will be forwarded to Central Office State Assistance Branch for their comments and recommendations. A representative of this office will attend the Regional Office review meeting on March 22, 1973.

If the Regional Office can be of assistance to you as you revise your Plans, please contact Mr. Theodore E. Fasso, Acting Associate Regional Health Director for Mental Health, or Mr. William C. Richardson, Alcoholism Consultant assigned to this office.

Sincerely yours,

Abel Garcia Ossorio, PhD

Abel Garcia Ossorio, Ph.D.
Regional Health Director

cc: Mr. Robert L. Solomon
Alcohol and Drug Dependence Bureau
Mr. Claude Reeder, NIAAA
Miss Ruth Sanchez, NIAAA
Mr. Theodore E. Fasso, Region VIII